

W. H. M. Reviewer's Copy

INSANITY, AND HOSPITALS FOR THE INSANE.

1. *Twelfth Report of the Commissioners in Lunacy to the Lord High Chancellor of England.* With Appendices. Ordered by the House of Commons to be printed, June 15, 1858, in return to an order dated June 11, 1858. (Colonel Clifford, M. P.) Blue Book, 8vo, pp. 56.
2. *The Medical and Legal Relations of Madness, showing a Cellular Theory of Mind and of Nerve Force, and also of Vegetative Vital Force.* By JOSHUA BURGESS, M. D. London: Churchill. 1858. 8vo, pp. 283.
3. *The Human Mind in its Relations with the Brain and Nervous System.* By DANIEL NOBLE, M. D., Visiting Physician to the Clifton Hall Retreat, Consulting Physician to the Manchester Ear Institution, &c., &c. London: Churchill. 1858. 8vo, pp. 157.
4. *Report of the Londonderry District Hospital for the Insane, to March 31, 1858.* By WILLIAM ROGAN, M.B., Resident Physician. Pamphlet, pp. 16.
5. *The Seventh Annual Report of the County Asylum for the Insane at Colney Hatch.* D. F. TYERMAN, M. R. C. S., Medical Superintendent, Male Department. W. G. MARSHALL, M. R. C. S., Medical Superintendent, Female Department. Pamphlet, pp. 194.
6. *Twentieth Annual Report of the Suffolk County Asylum for the Insane, to December, 1858.* By JOHN KIRKMAN, M. D., Physician-Superintendent. Pamphlet, pp. 36.
7. *Seventh Annual Report of the Wilts County Asylum for the Insane, from January 1st to the end of the Year 1857.* By JOHN THURNAM, M. D., Physician-Superintendent. Pamphlet, pp. 41.

8. *Tenth Report of the Somerset County Asylum for the Insane, from January 1st to the end of the Year 1857.* By ROBERT BOYD, M. D., Physician-Superintendent. Pamphlet, pp. 69.
9. *Second Annual Report of the State of the United Asylum for the Insane for the County and Borough of Nottingham, and the Forty-seventh of the original Institution, for the Year 1857.* By W. P. STIFF, M. B., Physician-Superintendent. Pamphlet, pp. 24.
10. *St. Luke's Hospital for Lunatics, for the Year 1856.* HENRY STEVENS, M. B., Physician-Superintendent. Pamphlet, pp. 34.
11. *The Necessity for some Legalised Arrangements for the Treatment of Dipsomania, or the Drinking Insanity.* By ALEXANDER PEDDIE, M. D., F. R. C. P. E., &c. Pamphlet, pp. 36.
12. *Mind and Body; a Discourse on the Physiology of the Phrenical Action of the Cerebrum.* By ROBERT JAMIESON, M. D., President of the Medical Chirurgical Society of Aberdeen, Physician-Superintendent of the Royal Aberdeen Asylum for the Insane. Pamphlet, pp. 24.
13. *Thirty-first Annual Report of the Perth Royal Hospital for the Insane, to June, 1858.* By W. LAUDER LINDSAY, M. D., Physician-Superintendent. Pamphlet, pp. 63.
14. *Thirty-seventh Annual Report of the Directors of the Dundee Royal Asylum for the Insane, for the Year 1857.* By T. T. WINGETT, M. D., Physician-Superintendent. Pamphlet, pp. 43.
15. *Medical Report of the Aberdeen Royal Asylum for the Insane, for the Year 1858.* By ROBERT JAMIESON, M. D., Physician-Superintendent. Pamphlet, pp. 24.
16. *Report of the Pennsylvania Hospital for the Insane, for the Year 1857.* By THOMAS S. KIRKBRIDE, M. D., Physician-Superintendent. Pamphlet, pp. 48.
17. *Fourteenth Annual Report of the Managers of the State Lunatic Asylum, January 7, 1857.* JOHN P. GRAY, M. D., Physician-Superintendent. Pamphlet, pp. 46.
18. *Reports of the Provincial Lunatic Asylum, Toronto, from 1st July, 1853, to 1st March, 1857.* Pamphlet, pp. 46. And *Report for the Year ending March 1, 1858.* Pamphlet, pp. 23. By JOSEPH WORKMAN, M. D., Physician-Superintendent.

19. *The Journal of Psychological Medicine and Mental Pathology.* Edited by FORBES WINSLOW, M. D., D.C.L., President of the Association of Medical Officers of Asylums and Hospitals for the Insane. Nos. 9, 10, 11, and 12. New Series, for the year 1858. London: John Churchill.
20. *The Asylum Quarterly Journal of Mental Science.* Published by authority of the Association of Medical Officers of Asylums and Hospitals for the Insane. Edited by CHARLES BUCKNILL, M. D., Lond. University, Physician-Superintendent of the Devon County Asylum for the Insane. London: Longman & Co. Quarterly Numbers, 24, 25, 26, and 27, for the year 1858.
21. *The American Journal of Insanity.* Edited by the Officers of the New York State Asylum. April, 1858. Utica: New York State Lunatic Asylum.
22. *Twenty-eighth Annual Report of the Belfast District Hospital for the Insane, to March 31, 1858.* By ROBERT STEWART, M.D., Physician-Superintendent. Pamphlet, pp. 47.
23. *Medical Opinion in the Parish Will Case.* By PLINY EARLE, M.D. New York. 1857. Pamphlet, pp. 50.
24. *On the Causes of Idiocy.* With an Appendix. By Dr. S. G. HOWE, dated February 26, 1848. 8vo, pp. 79. Edinburgh: Maclachlan and Stewart. London: Simpkin, Marshall & Co.
25. *Report of the Commissioners of Lunacy on Insanity and Idiocy in Massachusetts, U. S. A.* By EDWARD JARVIS, M. D. Dorchester, Massachusetts, 1855. 8vo. pp. 213.
26. *Reports of the Asylums for European and Native Insane Patients at Bhowanipore and Dallanda, for 1856 and 1857.* Calcutta: 1858. 8vo, pp. 70.
1. THE Commissioners in Lunacy of England, in their "Twelfth Report," to the 31st March, 1858, give the proceedings of their labours for the year then ended in their usually succinct and business-like manner, entering into detail in all those matters which demand this at their hands, and condensing into due and reasonable proportions such as comparative brevity appears the most suitable for. The Commission itself has been without any change in its *personnel* since last year, and consists of eleven members, headed by Lord Shaftesbury as Chairman, with four other honorary, and six paid Commissioners, half of whom are medical, and half legal; the paid Commissioners

always visiting in pairs, a medical one and a legal one together. The lawyers are very clever and ingenious in managing to get so much of the fat patronage of the land into their hands. The Benjamin's portion which they have possessed from time immemorial in the law proper is a great fact, and yet this does not come up to their grasping powers, but they must poach upon the medical profession, which is confessedly low in the scale of patronage. Even the half-dozen of stipendiary Lunacy Commissioners must be divided with the bar-men, a division which, we think, is here exceedingly out of place, inasmuch as we are quite at a loss to understand how the education of a barrister-at-law can be brought to bear upon the inspection of the insane, or what lawyers have to do with their management in any respect. Much better and more to the purpose would it be that the whole six of the salaried Commissioners were of the medical profession, and that number would be few enough, if even sufficiently numerous, for the requisite official visitation of the insane in England and Wales; the complaint at present being, and we believe justly, that for the work to be done there is not a sufficiency of a fitting inspectional staff.

In regard to new accommodation, providing for the pauper insane in public asylums, we find it stated in this Report that so many as eight asylums are in progress of erection; namely, one for Cumberland, to contain 200, to be completed in 1860, at a cost of £28,000. Durham, for 312 inmates, to be ready next month (December); cost £31,480. Carnarthen, 270 inmates, time of completion, uncertain; cost to be £45,835 4s. Bristol, 200, to be in operation next year; cost, £30,000. Sussex, 400; March 1, 1859; cost £51,843, exclusive of bedding, furniture, &c. Cambridge, 250, which was to have been completed in May last; cost, £49,670. Beds, Herts, and Hants, 504; time of opening, uncertain; cost £95,000. Northumberland, 200, which was to have been ready in September last; cost, £50,000. These eight asylums will afford accommodation for a total number of 2336 patients of both sexes, nearly equally divided, at a total cost of £361,828 4s., which is, no doubt, a vast expenditure of money, but absolutely requisite, and rather too long delayed in its particular appropriation. At the date of the Report there were in operation 33 county, and 4 borough asylums, with an aggregate population of 16,331 inmates, to which additions were in progress for the reception of 2481; these, with the new county asylums above enumerated, would enable asylum care to be afforded to 21,148 inmates, accommodation, however, which, though so apparently ample will, ac-

According to a calculation of the Commissioners, not only be fully taken up by the 1st of January, 1860, but by that time, judging from past experience, 1830 additional beds would require to be provided for. This, at first sight, might appear a very alarming state of matters, and lead to the supposition that insanity was greatly on the increase; but we believe there are no real grounds for this inference, the truth being that it is only just now the public mind has been sufficiently aroused to look after the proper care and treatment of the pauper insane, who hitherto have been so largely scattered about in workhouses and "licensed houses," instead of being, as is now happily taking place, provided for in county institutions, specially set apart and appointed for their due treatment and comfortable maintenance, and to effect which the public money could not be more righteously spent. To do the Commissioners, as a public body, but justice, they have been untiring in their efforts with, and calls upon, the authorities to have this most important desideratum accomplished; and great indeed, is the credit which they deserve for this faithful discharge of their duty to the public, and their suffering fellow-creatures.

During the year 1857 the county and borough asylums had under treatment a total number of 16,792. Of that number, 1854 were discharged recovered. The deaths from ordinary causes amounted to 1538; from suicide, to 7 only; and from accidents or violence, to 9. On the 1st of January, 1858, the total number remaining under treatment was 15,125, of whom only 1829 were deemed curable; thus leaving a residuary mass of incurables of 13,296 as a legacy upon the bounty of the country during the term of their natural lives.

The Commissioners' persevering and most proper efforts for the founding of a State Criminal Asylum, similar to our own at Dundrum, have at last, we are rejoiced to find, been crowned with entire success, a site consisting of 290 acres of land having been purchased for the small sum of £6000, on Bagshot Heath, in the county of Surrey, which would appear eminently well calculated as to healthfulness of locality, &c., for this special object. The building of the Asylum was to be commenced with all available despatch, so that before long it may be expected to be in full operation, which will be a great relief in many ways to the ordinary asylums, in which the presence of criminal inmates was so injurious to the other patients, and so much to be deprecated in every point of view. In our last year's^a

^a Vol. xxiv., No. 48, page 357.

Review, we took occasion to animadvert in the strongest manner upon the unaccountable and unpardonable neglect of the Government, in respect of providing the best accommodation the country could command for its soldiery, when, in the discharge of their hazardous and invaluable services at home and abroad, they were stricken down by insanity. We had fully hoped, that ere this the authorities had been aroused to action in this gross and scandalous neglect of their duty to the military class of the insane, and that the feeling appeal made on this subject by the Commissioners, in their Report last year, would, as a matter of course, and for the honour of the country, have been at once attended to. But great indeed has been our amazement to see that no step whatever has been taken up to the present time to remedy this crying evil, one which it is a disgrace to our common humanity to have ever had in existence.

The Commissioners thus pointedly and effectively refer to this matter:—

“The question of adequately providing for the care and treatment of insane soldiers remains still in abeyance. Our opinion on the many evils arising from the defective character of the existing arrangements for the accommodation of soldiers labouring under this malady has been expressed in many former Reports, and we have contrasted those arrangements with the excellent provisions made for insane sailors at Haslar Hospital. We are quite at a loss to understand why there should be so marked a difference between the two services, in the presence of the same calamity; and it will not be held beyond the limits of our duty, which we regret the necessity we have been under, of so frequently and so strongly animadverting on the continuance of this painful contrast, to add the expression of a hope, that, amid the general sympathy and attention awakened lately to the condition of the soldier, the absence of all proper human provision for his treatment under a disease to which accidents of service and changes of climate too frequently expose him, will not be much longer overlooked!”

If in the ensuing Session of Parliament, some independent Member of the House of Commons have not spirit enough to call upon the Minister at War for an explanation of this continued negligence in the discharge of a most serious and important duty, we shall have much reason to fear, that the philanthropy, humanity, and authority of that assembly have fallen to a low ebb indeed.

The Report refers to the Asylum at Haverfordwest^a, for its

^a This is a species of hybrid insane hospital, being neither properly a county nor a borough institution, but one *sui generis*, and containing 33 patients only.—REV.

continued defective and generally unsatisfactory state of management; its abuses and overt acts of neglect being so great as to call for the suspension of its medical officer, and the appointment of another in his place. The Northampton General Hospital for the Insane is also particularized for "certain alleged acts of cruelty and ill-usage towards patients," which called for special inquiry before two of the Commissioners, at the instance of the Home Secretary; the result of the investigation being, "that serious abuses and acts of violence had been committed by the attendants in the refractory male ward of the hospital, and that sufficient had been proved to justify and render imperative the immediate dismissal of the attendants;" who were dismissed accordingly.

The above are the only instances in which any deviation from kindly treatment has been noted by the Commissioners, and it is worthy of especial record, that not a single county or borough asylum is hinted at, to say nothing of being charged directly or indirectly, with any or the least dereliction of duty, each and all of them being presided over by physicians superintendents of high professional character, and of the most humane and indulgent conduct to their peculiarly afflicted and interesting charge. The Commissioners refer with regret to the circumstance of the Governors of Guy's Hospital having determined to close entirely the lunatic wards of that institution, and having already refused to receive any more female patients. The Commissioners, we apprehend, were rather exacting and interfering, if not crotchety, with the authorities of Guy's, in respect of their wards for the insane, which were an immense boon, being for the treatment of a select number of female patients of the middle classes, without any charge, and who were provided for in the most comfortable manner. The Commissioners state that they made an earnest appeal to the Governors on behalf of a lady "as one who had special claims upon their favourable consideration, and falling peculiarly within the benevolent scheme of the founder of Guy's," but all to no purpose; the snubbed Governors now snubbing the Commissioners in return, by refusing to admit the patient and permitting her, as the only alternative,—a very bad one,—to be transferred to the Workhouse. The Report also takes pointed notice of the unsatisfactory condition of single patients, a large number of them being in charge of medical men and others without any legal authority, and who are consequently deprived of the benefits of all independent supervision. This is a state of things which most assuredly calls loudly for redress.

Having drawn so largely upon the Report of the Commis-

sioners in reference to public asylums, we must not conclude our review of it without shortly noticing the metropolitan and the other provincial licensed houses respectively. The former amount to 37, and are thus licensed:—To medical men 24 (6 of whom are associated with females as co-licensees); non-medical men 5; females solely, 8, 4 of whom are styled “Mrs.,” and 4 “Miss.” The total number under treatment in these licensed houses for the year 1857 was 3647 (1648 males, 1999 females). The total number of discharges for the same period was 740 (326 males, 414 females). Total recoveries were 298 (125 males, 173 females). The deaths amounted to 276 (160 males, 116 females). The cases of suicide to 2 (males). There remained under treatment on the 1st of January, 1858, 2623 (1167 males, 1456 females), of whom those deemed curable were 325 (135 males, 190 females). Five of the above licensed houses received pauper patients, viz.:—Bethnal House, 329 of the pauper class, and 145 private; Grove Hall, 168 and 184, pauper and private respectively; Camberwell House, 266 pauper and 61 private; Hoxton House, 237 pauper and 95 private; Peckham House, 317 pauper and 49 private. The largest strictly private establishment (licensed to Dr. Williams) is Pembroke House, Hackney, and contained 115 inmates; and the smallest, Clarence Villa, Brompton (licensed to Samuel Batten), had but two patients (males).

The provincial licensed houses amounted to 77, 14 of which were for both private and pauper patients, and contained an aggregate number of inmates of 2697 pauper and 1497 private patients. The largest number of inmates (private and pauper) was at Fisherton House, Wilts (licensed to Dr. W. C. Finch), it containing 316, viz., 78 private, and 238 pauper. The largest entirely private establishment was at Brislington House, Bristol (licensed to the Drs. Fox), which contained 87 inmates; the smallest at Rook Nest, Wakefield (licensed to Dr. Atkinson), having but a single patient. 45 of the above provincial houses were licensed to medical men, 19 to non-medical men, 11 to females (10 “Mrs.,” 1 “Miss”), 1 to a “Mrs.” and a layman (not husband and wife), and 1 to a medical man and a spinster, conjointly. We have on former occasions^a expressed a decided opinion as to the impropriety of the insane of any class being in the charge of any party but a regularly educated member of the profession; and now again we feel called upon to repeat that opinion. It is, we consider, only too well calculated to make the impression that mere gain or lucre is the primary

^a See vol. xvi., No. 32, page 394; and vol. xx., No. 40, page 372.

object in view, and not the benefit of the patients so circumstanced. If the law be deficient on this point, by not allowing the Commissioners in Lunacy to withhold a license from any but a medical man, the time has fully arrived that so serious a defect should be rectified, and we hope it will, when next the lunacy laws come before the Legislature for amendment. We close our review of the Commissioners' Report with the annexed usual "Summary," which it contains; and in taking leave of their Report, we may observe, that though it is a Blue Book deserving of much praise, and containing no small amount of matter of a most interesting and important kind, yet, it is our disinterested and deliberate opinion, that its compilation and contents generally, as compared with the Reports of the Inspectors of Asylums in Ireland, fall considerably short of the latter. We do not make the comparison in any invidious spirit, but honestly, and with the view of suggesting the Irish Reports to the attentive consideration of the Commissioners. We feel assured that they will have a model before them from which they may glean very useful information, and not a few practical hints that might be turned to good account in their future "Blues." Another observation we have to make before parting with the English Commissioners, for another year, and then greeting them, as we hope, with a hearty welcome. It is simply this: that we desire to see them less crotchety, and more stable in purpose than hitherto we have perceived them to be as a body. We now allude more especially to unsettled views in more ways than one on their part. Shiftings and waverings, even with individuals, soon lose for them all confidence and respect for their opinions; how much more will not a public body of men find themselves deprived of their *prestige* who evidence feelings in this way? The Commissioners' crotchets and fault-findings, we have already stated, would not be submitted to by the Guy's Hospital authorities; and the bad consequence of this martinetism has resulted in the closing of the "lunacy wards" of that great and wealthy establishment, and thus debarring female insane patients of the middle class of life from receiving the important benefit thereof. Let the Commissioners avoid for the future this hyper-officialism, which will ultimately recalcitrate upon themselves, and cause great and just dissatisfaction. Official powers are given to be used, not to be abused. The Commissioners, we consider, have failed in the *fortiter in re* by giving way to public asylums, now in progress of building, containing more than a maximum number of 250, which at one period they approved, but are now sanctioning them to have 500 beds; as also, that these impor-

tant institutions should not exceed two storeys in height, but which are now permitted to be three, contrary to the advice of the most experienced and competent in such matters. We might extend these observations, but for the present we prefer not doing so, and shall here leave them, merely stating that what we have said we have intended in the best spirit, and hope it will be received in the same.

Summary.	Private.			Pauper.			Total Males.	Total Females.	Total Lunatics.
	Males.	Females.	Total.	Males.	Females.	Total.			
Asylums,	134	98	232	6,797	8,134	14,931	6,931	8,232	15,163
Hospitals,	818	759	1,577	95	79	174	913	838	1,751
Metropolitan Licensed Houses,	676	630	1,306	490	827	1,317	1,166	1,457	2,623
Provincial Licensed Houses,	754	743	1,497	603	547	1,150	1,357	1,290	2,647
Royal Naval Hospital,	126	..	126	126	..	126
	2,508	2,330	4,738	7,985	9,587	17,572	10,493	11,817	22,310

295 of the above (171 males, 124 females) were "found lunatic by inquisition;" and 633 (490 males, 140 females) are given as of the "criminal" class of lunatics.

2. The volume of Dr. Burgess on the "Medical and Legal Relations of Madness" is of tolerably ample dimensions (it numbers nearly 300 pages), embracing a considerable variety of topics, in connexion with the general subject, and is evidently the production of one who has not been without extensive acquaintance with the matters on which he treats. It comprises what may be styled a series of essays on the physiology and pathology of insanity, preparatory to some judicious observations on the legal view of this disease, and concludes with some useful and practical directions as to its treatment. We cannot but express our opinion that he might have improved the title of his work by substituting for the word "Madness," a more professional and less vulgar term; as well as that a good deal of condensation in the general treatment of the topics handled, would have tended to render the volume not alone more readable, but also practically useful. The author's views on the legal question are sound and practical. He does not fail to expose the highly unsatisfactory and unsettled state of our laws, both in the theory and in the practical application to the class of sufferers under consideration, and advocates the appointment of secondary courts of jurisdiction or inquiry, as by commission, in the case of criminal lunatics, as well as legal, or in suspected cases, and in

this suggestion we are strongly disposed to concur. The treatise is illustrated by a large number of *cases*, many of which are singular and interesting, and well adapted to reflect light on a subject confessedly requiring all the aid which practical experience, as well as scientific investigation, can possibly cast upon it. On the whole, we can recommend a perusal of its contents to all who are engaged in endeavours to ameliorate the condition of the insane.

3. Like all that has appeared on kindred subjects from the pen of Dr. Noble, his work, as noted in our list, is characterized at once by its soundness of professional scholarship, candour, and common sense. The psychological part of the work manifests no ordinary degree of correctness in view, as well as clearness of statement; the latter quality being one which (as far as our experience goes) does not always—perhaps, indeed, we might say very often—manifest itself in works of a similar character, and of a much more pretentious caste. As regards mental science, Dr. Noble may, perhaps, be classed among those of the Kantian or Transcendental school, but his accurate mind and sober sense prevent him from following such guides into any too far exalted or ærial flights: the consequence is, that the soberest thinker, who has at all duly thought or extensively read on the subject of mind, will discover nothing here which is calculated to offend. The physiological portion of the work is mainly based on the views of Dr. Carpenter, to whom the author, with creditable candour, confesses his obligations, while with equally creditable independence of view, he differs from him on some points.

Were we to specify any portions of this able volume as worthy of more particular attention, we would refer to Dr. Noble's exposition and theory of consciousness (in chap. v.) and his very admirable vindication of the exalted science which he himself so honourably pursues from the unfounded charge of materialism (too often and too recklessly brought against it), in the concluding chapter, which latter we think deserving of being transcribed in full, and which is as follows:—

“In propounding the foregoing psychological doctrines, I have striven to correlate them with our best established teachings concerning the brain and nervous system; and there *knowledge* upon the subject is defective, with some probable hypothesis and rational speculation. It would be too much to say that the physiological psychology is complete, and to be relied upon in all its parts, or that it is competent to explain all the difficult questions which arise in connexion with this interesting topic. I think, however, that, as a

whole, it is recommended to us by the highest probability. It rests upon a wide induction of facts; and where its propositions are not demonstrable, they have, I think, verisimilitude. Whatever alterations in detail may hereafter become necessary, as the result of ulterior investigation, there can be but little doubt, I apprehend, that, in its essential substance and form, it will maintain for itself that firm position which, in this country at least, it has already established.

"Certainly, in much that has been advanced, there is an insufficiency of evidence for proofs of some of the proposed views, and, upon several points the attempted generalization may be premature. But if, in our own investigations—particularly of such entangled questions as the present—we go on for ever accumulating facts merely, and never make an effort to determine the conclusion which they would seem to indicate, we shall only render the existing perplexity still more complicated. As well observed by an able and eminent philosopher of the present day:—‘Although we may often err on the hasty side of generalization, we may equally err on the side of mere elaborate collection of observations, which though sometimes leading to a valuable result, yet, when cumulated without a connecting link, frequently occasion a costly waste of time, and leave the subject to which they refer in greater obscurity than that in which it was involved at their commencement.’

"I submit, indeed, that in any attempted corroboration of psychology and physiology, it is impossible, in the present state of positive knowledge, to avoid speculation; and further, that for the attainment of clear and connected ideas of psychological pathology and medicine, it is good and useful to construct rational hypotheses, in default of complete and absolute reliable theories. But, of course, hypotheses must not have their value or their office misunderstood; they cannot rightly form a rest like an admitted axiom; they must always be held ready for modification or abandonment, when evidence appears to demand some such proceeding. Meanwhile, they serve to ‘colligate facts,’ and to fix the attention more inquiringly and searchingly upon phenomena that present themselves to observation or experiment. ‘There is a period in knowledge,’ says Dr. Crichton, ‘when hypothesis must be indulged in, if we mean to make any progress. It is that period when the facts are too numerous to be recollected without general principles; and yet where the facts are too few to constitute a valid theory. Before closing this little work, I would once more guard such of my readers as are unfamiliar with discussions of physiological psychology, against the impression that science suggests the doctrine of materialism, which any multiplicity in the substance of the soul would seem to involve. If there be particular characteristics which more than others distinguish the conscious EGO from mere body, these, I conceive, are spirituality and unity of essence. Have we not the same assurance from pure consciousness, that the ME which thinks is not material—composed of parts, as we have from sense consciousness that body

is extended, and an aggregate of atoms. Indeed, there is nothing in physiological psychology which ought to suggest even the approaches of materialism. In the present sphere of existence, the mind is manifested through organic intervention: a thousand circumstances prove the fact. It is yet no more the case that the material brain is the conscious principle, and its separate parts divisions of the mind, than that the music of the lyre inheres in the instrument, and that the melodies which art can elicit from it are self-produced by the particular strings.’”

4. The Report, for the present year, of the Londonderry District Hospital for the Insane is the first one with which we have been furnished of that institution, now in operation since 1829. It is only, however, within the last two years that it had the advantage of a Physician-Superintendent in the person of Dr. Rogan, the writer of the concise and practical Report now before us. The counties from which patients are received in this Hospital for the Insane are those of Londonderry and Donegal,—that of Tyrone, which also belonged to it, having been separated from it a few years ago, and formed, together with the county of Fermanagh, into a new District Asylum at Omagh. Dr. Rogan states in his Report, that the total number under treatment during the year amounted to 302, of whom the sexes were 152 males, and 150 females. The disposal of the above was as follows, viz.:—Discharged, recovered, 53 (19 males, 34 females); ditto, improved, 18 (10 males, 8 females); ditto, not improved, 2 males; died, 13 (6 males, 7 females); remaining at close of year under treatment, 216 (115 males, 101 females). The largest number of the admissions of the year, which were 93 (42 males, 51 females), was between twenty and thirty years of age; and of the recoveries, 2 had been under treatment nearly seven years, and 12 under two months; which it is questionable was a sufficiently long probation to test their perfect restoration to mental health, the minimum period for this being considered at least three months; and some authorities aver that no decided ease of mental derangement should be discharged as recovered under twelve months, which, perhaps, is in the other extreme. Supposed causes of disease were only assigned in 18 cases of the year's admissions, all the others (75) being unknown. And of those 18, 7 were attributed to “fright;” 5 to “drink;” 2 to puerperal affections; 1 to “jealousy,” and 1 to “injury of head.” 29 of the year's admissions were married, and 64 unmarried. The causes of the 13 deaths were as follows, viz.:—Marasmus, 6; phthisis, 3; suicide, 2; and epilepsy, 1. In regard to the suicides,—both of

whom were males, and both bent on thus terminating their miserable existence, having previously made very deliberate but unsuccessful attempts of the kind,—one hung himself with a mason's line which he had contrived to secrete when tradesmen were on the premises, and the other accomplished his object by strangling himself with the strings of a strait-jacket. The advocates of non-restraint (of which we do not profess to be of the number) will claim this, likely, as a strong proof in their favour, that mechanical restraint, in suicidal cases, is no prevention against the occurrence of so unhappy a result, but rather is a help to it, which no doubt so happened in this instance; but the same could have been accomplished, and assuredly would, by other means constantly and unavoidably at the command of the insane. We take it that there are cases of this description which no earthly means, or human foresight, can thwart the accomplishing of, and that though the very means used in this instance resulted as it did, it is no valid objection to the use of a strait-jacket when circumstances appear to demand its imposition. Dr. Rogan calls attention to a serious deficiency of water on the premises, which, in such an establishment, is an evil of incalculable magnitude, and to remedy which, neither means nor expense should be spared in having supplied in abundant quantity; he also points out the necessity of bathrooms and lavatories being provided, the utter want of which must be an hourly evil, and very detrimental to the sanitary state of the house, and common personal cleanliness of the inmates, but which, of course, are out of the question until, first, water be at full command throughout the establishment. Dr. Rogan is an advocate, we are glad to find, of a good standard dietary for the insane as a class; but, on looking at the dietary table in use in this institution, we find that no solid meat is allowed on any day in the week, or at any period of the year, to the patients in ordinary, whose dinner meal consists of "ox-head soup" and bread on but two days in the week, and of "vegetable soup" and bread on the other five. We would be very glad to see a change made in this respect in so well-conducted an asylum as that at Derry admittedly is; and we feel quite satisfied that, so far as Dr. Rogan, its excellent Superintendent-Physician, is concerned, the defect now hinted at will be duly attended to. The expenditure of the year amounted to £5248 6s. 11d., included in which is the comparatively large sum of £63 13s. 8d. for tobacco, an item of expense which, on hygienic principles, ought to be banished from our hospitals for the insane; and which, even in America, where that noxious

production is deemed a necessary of life, is becoming the exception to the rule as regards its use, in all ably and well managed public asylums.

5. The County of Middlesex Hospital for the Insane, at Colney Hatch, has now been in operation seven years, and had under treatment at the period of its last printed Annual Report for the year ending 1857, the large number of 1293 patients, of whom 524 were males, and 769 females. The Report before us is a large one of its kind, and copious in the way of detail and statistics, the professional portion of the latter being both carefully and elaborately prepared, and accordingly reflecting much credit upon Mr. Tyreman and Mr. Marshall, the chief resident Medical Officers of this institution, which contains within its walls such a mass of afflicted humanity. The Committee of Visitors, eighteen in number, occupy the first twelve pages of this official document, which, it is but right to say, is less flippant and more free from that overbearing and dictatorial spirit than we usually find to pervade visitors' reports in general, which is no small recommendation in favour of the present one, as far as regards those gentlemen, who evidence much honesty and good sense when they say—

“ That the provisions of the Act of Parliament are now so much more satisfactorily complied with by the more ample and far more interesting details furnished by the Medical Superintendents and other heads of departments, that unless any special occurrences have taken place which belong to the institution generally, rather than any particular branch of it, little remains to be said by the Committee which is not better told by the officers themselves.”

This is an excellent example for other committees of asylums to follow, but who, we fear, are so prone to write themselves into notoriety, and appear great men at the expense of the labours of their hard-worked medical officers, over whom they would fain be lords and masters to the utmost, that we have little hope of seeing the modest bearing of the Colney Hatch Committee of Visitors copied to any considerable extent by their brethren.

The Visitors in their Report lament—

“ That the demand for admission is still very greatly in excess of the accommodation existing at the two asylums; and that in spite of the increased numbers now provided for, amounting to nearly a 100 in the last two or three years, there would seem to be little relief comparatively with the demands of the parishes. Indeed, the number of applications for admission of patients supposed to be

curable, and not afflicted with paralysis or epilepsy (all of whom are received, whether there be a vacancy or not) has shut out a vast proportion of the ordinary cases.”

This, no doubt, is a state of things much to be deplored, and requiring an immediate remedy; but we much doubt if the remedy now being adopted by the authorities of both this Asylum and its sister one at Hanwell will be a satisfactory one; namely, further extending their already overgrown establishments, which contain inmates quite sufficient to be spread over about eight asylums, thus giving nearly 300 to each, although it is generally admitted by the best authorities that, in order to do anything like justice to either patients or officers, a larger number than 200 inmates should not be under any one roof. We have in our last^a and former Reviews expressed our opinion on this subject, and need not now enlarge on it further than to reiterate our strongest protest against this most pernicious system of heaping together the insane *en masse*, and thus setting an example in the metropolis which the provinces will be only too ready to follow, and so be doing an irreparable injury to a class of the afflicted which, of all others, demands that everything should be done and every means used for the amelioration, if not the cure, of the heavy dispensation it is their misfortune, not their fault, to labour under. The responsibility which those placed in the position of Visiting Justices take upon themselves is a most serious one, in closing their ears against all remonstrance on this head; and, seeing that hitherto they have so acted, the time would appear to have fully arrived for the Legislature to interfere and put bounds to the unlimited power the magistracy has been exercising in a matter of the deepest and most vital moment, not merely in a local, but in a national point of view. Passing over the lay portions, if we may so say, of this elaborated document, we come next to the separate Reports of the Medical Superintendents, and from them, did space permit, not a few extracts of great interest might be given. We are compelled, however, to summarize, and to content ourselves, on the present occasion, by stating that the total number discharged, recovered, and relieved, of those under treatment during the year, as already referred to, was 147 (73 males, and 74 females); and the deaths 116 (67 males, and 49 females). The principal cause of death is assigned to general paralysis, viz.:—43 (28 males, 15 females); next, phthisis, 21 (13 males, 8 females); epilepsy, 15 (8 males, 7 females); natural decay, 14 (6 males, 8 females); bronchitis,

6 (4 males, 2 females); peritonitis, 3 (2 males, 1 female); suicide by hanging, 1 (a male); maniacal exhaustion, 3 (1 male, 2 females); apoplexy, 2 (females); other causes, 8 (4 males, 4 females). One of the females, still under treatment, is stated to have made several attempts to pluck out her eyes, and to sew her eyelids together, besides bruising her hands in striking them against the fire-guard, or beating them with a poker. A distinctive feature in this Report of the Colney Hatch Asylum is one entitled, "Meteorological Records," which contains much that is interesting, both to the professional and general reader, being drawn up with much scientific care and ability. We find also a special Report from the matron, which we consider quite beside the duties of such an official, and only too well calculated to place her in a false position, and bring the whole Report into ridicule. Why not have Reports from the cook and the laundress also? One from the former might, perhaps, be a very useful record. The "Steward's Report" is another of the documents in this Report which bears about it an absurd air of pretentiousness and importance from a mere subordinate.

The total expenditure incurred in the support of this immense establishment for the past year was £38,774 14s., the largest item in it being for meat, viz., £4705 2s. 8d.; the next, for malt, hops, and beer, viz., £2147 10s. 5d. In the pernicious articles of tobacco and snuff a sum of £332 12s. was spent, against which we have strongly to protest; and on the other hand, to denounce now, as we have done before^a, the parsimony practised in remunerating the medical superintendents for the vast amount of labour and immense responsibility placed upon each of them. "Muzzle not the ox that plougheth out the corn," is a command contained in Holy Writ, but which has been entirely overlooked in this case; and great indeed is our surprise to find that two highly educated gentlemen, having the constantly anxious charge of 1293 lunatics, receive but £200 per annum each for labours, mental and physical, which must be unceasing and onerous to a degree. Comparisons, we know, are unpalatable; but, without meaning any offence, we feel bound to say that when the chaplain is paid a salary of the same amount; the clerk of the Asylum, £250; the steward, £190; and the clerk to the Committee of Visitors, £130, the medical superintendents, who are the mainspring and the really responsible and hard-worked officers of the institution, should receive salaries of at least £500 per annum each, with all the

^a See vol. xxiv., page 382.

other usual advantages and allowances; and still be far from obtaining a liberal requital for the important professional services rendered by them. It is an economy of the worst kind thus to "cabin, crib, and confine" efficient officers; and sooner or later it will be found, that so great an injustice, though now submitted to, will not fail to be productive of pernicious consequences.

6. The Twentieth Annual Report of the Suffolk County Asylum, by Dr. Kirkman, its experienced and benevolent Physician-Superintendent for more than a quarter of a century, informs us that, "though the year that has passed has not been free from weighty anxieties, increased by the severe illness of some of the officers, and several of the old attendants, it is satisfactory to be able once again to report the healthy condition of the patients, and the comfort and quietude of the house." We agree fully with Dr. Kirkman in the spirit of the annexed extract, in which is embodied much that is valuable, and deserving of the best attention, coming, as it does, from so eminent an authority in the treatment of insane patients:—

"Our treatment in asylums may partake too much of class treatment, too little of individuality. There is often a stiff formality observable when all sit like school children, thereby invariably raising the medical officer to the likeness of a schoolmaster, and the only indications of convalescence in his patients are supposed to be the unbended back and the padlocked lip. Loud discourse is not inconsistent with order. In some recent suggestions there seems to be an apparent forgetfulness of the truth recognised by all sound authority, that each case requires its particular treatment. There should be variety of accommodation to meet variety of habits and fancies. Some patients, to whom the very 'grasshopper is a burden,' will prefer single rooms; others, fearful of being left alone, will entreat to be placed in companionship. It is desirable, as far as possible, to comply with each individual request; and to yield to each individual's inclination in the hope of cure."

We often hear, as an evidence of the improved conduct of asylums of the present day, of permission being given as a great boon to their inmates to go beyond the walls, and indulge themselves by breathing the fresh air, and admiring nature in all her charms, in an extended walk in the adjoining country; but this has been no novelty to the well-cared for and really liberally treated inmates of the Suffolk Asylum, as the following paragraph records:—

"We are not in the condition of men starting afresh, but of those who have literally borne the burden and heat of the day. It

was the practice, twenty-five years ago, when the number of patients was only 150, to allow both males and females the indulgence of the free air system; they walked to Bromeswell, Sutton, Bridfield, and the adjacent villages; they attended the churches of Ufford and Melton, and, with those exceptions, we have never varied in encouraging the removal of all unnecessary restrictions."

We cannot forbear transcribing another extract from this excellent and sensible Report, the Christian spirit of which is so creditable to its writer:—

"It is hardly possible to over-estimate the value of the expressions of affectionate regard which have been made by many who have attended the funerals of their relatives and friends, at the sight of the grave of the grandchild of the Superintendent in the Asylum ground. The fact of one of his family lying among the insane has realized the conviction that a feeling of unity exists among those who have taken a lively interest in their temporal welfare, with an anticipation of that undivided union to be enjoyed by the whole household of faith, when diseases of body and of mind shall all be among those 'former things which have passed away,' and when a glorified body, a purified conscience, and a perfected reason, shall be possessed by all."

The number of patients treated during the year amounted to 377 (168 males, 209 females); the recoveries were 54; the relieved, 7; and the deaths, 36; which left under treatment, at the close of the year, 278 (122 males, 156 females). The causes of death were—exhaustion and senile infirmity, 15; phthisis, 10; epilepsy, 5; apoplexy, 2; empyema, paralysis, diarrhœa, and cardiac disease, each, 1. The year's disbursements amounted to £6100 14s. 2d., of which tobacco formed no part, much to the credit of the institution.

7. A case of delirium tremens having been presented for admission into the Wilts County Asylum, as stated in the Report of Dr. Thurnam for the year 1857, it was refused admission, not being deemed eligible. There are great difficulties in such cases, and, strictly speaking, they do not come within the proper objects, perhaps, of an asylum for the insane; but in the absence of a fitting receptacle for such, it is a greater evil not to take them into temporary charge, and so far as, in the greater number of instances at least, furious and uncontrollable delirium is an evidence of derangement, there could be no more fitting inmates for the wholesome restraint of such establishments. We hope at no distant period to see some provision made for the due surveillance and treatment of a class of patients, for such we must deem them, so imperatively calling for the inter-

ference of friends to save them from themselves, and, perchance, be the means of restoring them to society, as sober members thereof. Another paragraph in Dr. Thurnam's practical report has attracted our attention, namely, the reference he has made to a special case, requiring to be mechanically restrained, the first, it appears, since his institution was opened, a period now of six years. The reasons assigned for this departure from the rule in operation in this Report are potent in the extreme, and our only regret in the matter is, that any superintendent should feel himself called upon to make any excuse, for it so appears to us, for imposing a strait-jacket, or any other species of temporary means, to correct perverted habits, or otherwise, any more than he would for prescribing a shower or plunge-bath, or an heroic dose of laudanum or tartar-emetic. Men in their responsible position should have the moral courage to do what they, in the exercise of their judgment and sound discretion, believe to be right, without any fear of consequences. *Fiat justitia ruat cælum*. Another passage in the Report deserves being mentioned. We refer to what is stated in regard to "the efficiency of the water supply, and its continuance, through any needful repair of the steam-engine;" and its being "proposed to erect a supplementary pump, with a wheel or capstan, to be worked by some of the male patients, or by a horse." In Ireland it has been objected to by a Royal Commission, consisting of two Englishmen, Mr. Wilkes, one of the Medical Commissioners in Lunacy, and Professor Donaldson, C. E., that the male patients should be employed at labour of this heavy and monotonous kind; but now that a similar mode of dealing with the patients is contemplated, even in one of the best conducted asylums in England, as that at Wilts confessedly is, the custom in Ireland in this respect need not be considered so entirely *outré* and un-English.

The Wilts Asylum, in common with its congeners, was unable to accommodate the applications for admission during the past year, and consequently, we are sorry to find, is likely to undergo extension, it being sufficiently large as it is, for all useful purposes. We ventured to give a caution on this head in our last Review^a, but we are afraid the authorities are not disposed to receive the advice then tendered. We hope, however, that Dr. Thurnam will not be a willing party in the enlargement, so far as he has a voice in it.

The total number treated during the year was 414 (199 males, 215 females). The discharges in recoveries were 42

^a See vol. xxiv., page 382.

(25 males, 17 females); 3 were removed as relieved, and 32 died; 27 of the deaths were males, and only 5 females, which was a great disproportion. The causes of deaths were:—Phthisis, 6 (males); paralysis, 6 (males); inflammation of the lungs and pleura, 6 (5 males, 1 female); exhaustion, 4 (males); carbuncle, 2 (males); diarrhœa, 2 (females); disease of the heart, 2 (1 male, 1 female); cancer of the stomach, 1 (male); perforating ulcer of the stomach, 1 (female); epilepsy and pleurisy, each 1 (male). The total payments for the year amounted to £8263 17s., and we are sorry to find that the large sum of £57 14s. 3½*d.* was expended in tobacco, snuff, and tobacco-pipes; whereas in newspapers and periodicals only £3 4s. 4*d.* were invested.

8. The initiative, we are very glad to find, has been made in the County Somerset Asylum, of dispensing with the services of a matron, a vacancy having recently occurred in that office, which afforded the opportunity of ceasing and determining it by the appointment of a “head attendant of the female side” instead thereof,—a reform in the staff of hospitals for the insane which, it will be recollected, has been often advocated in these Annual Reviews. Dr. Boyd, the head of this establishment, so justly celebrated for its superior management in every respect, continues to advance with this day of progress in its conduct. He is making arrangements with the Committee for the “building of a large room for assemblies, in which a considerable proportion of the patients of both sexes may dine together,” which is a step decidedly in the right direction; and *apropos* to which we may just observe that, nearly two years since, we ourselves saw this system of association in operation, and with the happiest and most civilizing effects, at the Lucan Asylum, county of Dublin, where the patients formerly domiciled in the “Hardwicke Lunatic Cells” are now most comfortably and advantageously placed, and supported by Government, under the immediate and careful superintendence of Dr. Henry Stewart. Dr. Boyd speaks much in praise of a large dormitory, containing 71 beds, a size which we cannot agree by any means with him in thinking at all desirable or worthy of imitation. No ventilation, however perfect, could, in our conception, preserve the surrounding atmosphere pure with such a number; and, setting this aside, we are clearly of opinion that congregating into one room so many human beings, and those especially the subjects of insanity, and of course more or less restlessly inclined, is entirely opposed to that quietude which is so important an ingredient for securing a sound night’s repose. This

is not, we fear, progressive, but rather retrogressive, improvement in the moral and social management of our insane hospitals. We regret having to differ from so eminent and worthy a man as Dr. Boyd ; but he must forgive us for differing from him *in toto* upon this point of domestic economy in his otherwise most excellently well-conducted Asylum. The results of the year are thus given in the Report :—Admissions, 167 (93 males, 74 females) ; discharged, recovered, 72 (38 males, 34 females) ; ditto, relieved, 21 (8 males, 13 females) ; ditto, unimproved, 24 (10 males, 14 females) ; total discharged, 117. Died, 47 (25 males, 22 females). Remaining under treatment on 31st December, 1857, 358 (178 males, 180 females). In the medical treatment pursued during the year Dr. Boyd speaks approvingly of the shower-bath, and gives one case in particular, that of a very turbulent female, in which its frequent application appeared to produce the best effects. Opium was given with decided benefit in some cases of melancholia attended with sleeplessness and a reluctance to take food. The preparation used was prepared by macerating for a month, 1 part of opium in 1 of hydrochloric acid, diluted with 19 parts of distilled water. The liquor, being filtered, is supposed to be of the same strength as the tincture, but has a stronger odour of the drug, and keeps very well. The largest quantity taken by one patient was half an ounce in twenty-four hours, which produced the full narcotic effect. Dr. Boyd states that this preparation is less stimulating and better suited for the insane than the pharmacopœial tincture. Cod-liver oil was found useful in cases of marasmus, and tincture of sumbul in epileptic and hysteric cases. This Report is, as usual, altogether a very able and practical one. The expenses of maintenance for the year amounted to £8589 15s. 0 $\frac{3}{4}$ d.

9. The Nottingham Asylum for the Insane had, according to Dr. Stiff's Report, 307 patients in its charge during the past year, 157 being men, and 150 women. The recoveries which took place during the year were 28. 6 were discharged, relieved ; 3 not improved ; and 23 died ; which left in the house, at the close of 1857, a population of 247 (130 men, and 117 women). This is one of the exceptions in which the males preponderate over the females, the reverse being generally the case. Dr. Stiff's Report has the following judicious and sensible observations on the subject of restraint, which we give with much pleasure :—

“The heading of ‘Important Occurrences of the Year’ may be briefly disposed of. There have been no inquests, no serious acci-

dents, no mechanical restraints employed. In making the last statement, I wish particularly to guard myself against being supposed to advocate the extreme views which have been promulgated amongst the public respecting their use—‘That restraint is never necessary, never justifiable, and always injurious in all cases of lunacy whatever.’ It is useful occasionally to refer to the state of medical opinion bearing upon points connected with the treatment of insanity. Extended inquiry and observation have led to the general abandonment of the extreme dictum just quoted. My doubts respecting its propriety were confirmed by experience in 1855-6. A patient who had endeavoured to drown himself before admission made further attempts after admission to destroy himself, by hanging, by strangulation, by swallowing pins, by self-mutilation when taking exercise, by dashing his head against walls, by tripping himself up when arm-in-arm with attendants, so as to produce concussion; by refusal of food for weeks, and after compulsory feeding by exciting vomiting by means of his fingers, so as to eject the food, &c. After having exhausted every means of treatment short of restraint, including special watching, it was deemed impossible to keep him alive without it. Restraint was then employed, and in a short time the patient recovered, and returned home. In a somewhat similar case, which occurred soon after, a more recent mode of treatment was adopted—the system of out-door exercise under supervision. This patient destroyed himself on the first day of the experiment. I am even disposed to admit that restraint might have been employed with benefit during the past year. One patient, violent, destructive, and remarkable for her cunning and mischievous propensities, became a source of almost incessant torment, and occasionally of danger, to her fellow-patients, for several months, which a slight amount of restraint would have remedied. Other cases, intractable to ordinary management and therapeutic remedies, have been recorded in some recent Reports to the visitors of several county asylums. Emanating from disinterested and able practitioners, they are worthy of consideration, more especially as there is a disposition to ignore their occurrence.”

Extracts then follow of the non-restraint Superintendents of the Hants, Kent, Norfolk, and Leicester County Asylums, and of the Birmingham Borough Asylum, having been compelled to yield to the pressure from within rather than the pressure from without, and honestly and humanely use restraint on certain special occasions. Dr. Stiff deserves great credit for thus fearlessly and independently expressing his opinion (and he is no mean authority) on a much perverted and ill understood point of detail in the management of the insane.

The dietary of this institution is good, liberal, and varied. Milk porridge, or coffee (one pint and a quarter), with bread (seven ounces), and an allowance of butter (a quarter of a pound

amongst twelve patients), are given for breakfast; cooked meat, free from bone (six ounces), with bread (four ounces), vegetables (one pound), and beer (half a pint), are served on two days in the week for dinner; meat pie, potatoes, and beer, on one day; pea-soup or Irish stew, bread and beer, on two days; and ice-pudding, bread, cheese, and beer, on two more. The supper consists of bread (six ounces), cheese (one ounce), beer (half a pint), or milk porridge or tea (one pint and a half). Regular workers in the garden, laundry, &c., have in the forenoon a lunch of cheese, bread, and beer; and later in the day a draught of beer. The total payments made in the year were £7729 7s. 4d.; the only remark we have to make on which is, that *smoking* cost £28 and upwards; but Dr. Stiff, we are sure, will have this defect in his otherwise most creditably conducted institution removed in due time.

10. The Report of St. Luke's Hospital being so far back as 1856, and only now furnished to us, we cannot be expected to devote much attention or space to its contents. We think Dr. Stevens, its able Physician-Superintendent (who, *en passant*, we regret to see holding but a subordinate position in the printed Report before us, the two merely Visiting Physicians taking precedence of him in it, though he, of course, has all the responsibility), might have supplied it in due course, when published; but, passing this by as an oversight on his part, we are glad to observe that the improvements in this institution have, even at the eleventh hour, been considerable, and that there is an evident desire on the part of its ruling powers to persevere in this work of wholesome and needful reform to the utmost, thus yielding to the force of public opinion and the animadversions of the Commissioners in Lunacy, who, in the discharge of their duty, condemned St. Luke's in no measured terms for its shortcomings, and for its "cheerless and dreary aspect:" a most just censure, and one upon which we commented at the time^a. We fear, however, that no transformation or improvements, be they ever so extensive, will make St. Luke's a desirable receptacle for insane patients; and that, in accordance with the suggestions in our Annual Review for 1855^b, the sooner it be given up, and a suitable one erected in the suburbs of London, the better and more humane it will be for all parties, more especially for the patients within its "cheerless and dreary" walls.

^a See vol. xx., No. 40, page 374.

^b See vol. xxii., No. 44, page 439.

11. Dr. Peddie's *brochure* is, in substance, as the preface informs us, the author's views on the important subject of which it treats, originally presented to the Medico-Chirurgical Society of Edinburgh in the form of an address or paper, and, as we are still further informed, generally approved by that learned and highly qualified auditory. It is, moreover, the result of the author's deliberate judgment, written and formed eight years ago, although only now published. Whatever opinion, therefore, may be come to by the reading and thinking portion of the public on the views thus presented to them, the writer must certainly be exempted from the charge of any undue rashness in giving his ideas to the press, as he has literally observed the rule of the Latin critic, "Nonum prematur in annum."

There are few persons who will read the title-page of this medico-legal pamphlet, and not, we feel pretty certain, indulge in an almost involuntary criticism to the effect that Dr. Peddie has ventured on ground of extreme delicacy, if not of danger, in advocating a course which almost directly involves so apparent an infringement on that boast of every British subject, the *Habeas corpus*. But a more legitimate, if not a more natural and necessary feeling, perhaps, under the circumstances, is that of a shudder at the acknowledged state of our society, now in the nineteenth century, which warrants such a plea as Dr. Peddie feels himself called upon to set up in behalf of the safety of the majority as concerned in, and endangered by, the moral degradation of the few (if, indeed, they be the few) whose indulgence in the vice of abused stimulants has rendered such a plea necessary. The writer's conclusions are based on legal enactments (however imperfect in past times), as well as a rather large induction from fact, and are thus concisely given (p. 22):—

"I. That the man furious or delirious from drink requires immediate restraint and surveillance in an asylum or elsewhere, for some considerable time, and until he has completely recovered from the fit.

"II. That the dipsomaniac must unquestionably be considered as an insane person, as labouring under such weakness of the mental faculties, and such perversity of the moral feelings, as to warrant, not only the imposition of restraint, but its continuance for a considerable period of time, probably two or three years, so as to afford the only chance there is that self-control may be regained, and ruin averted.

"III. That the law gives too limited a definition of insanity, when it does not recognise these extreme cases as falling within its powers; that, consequently, when such cases have been treated in

asylums, they have been submitted to in some measure, or to some extent voluntarily, or been detained illegally, and in neither case so successfully as should have been under other circumstances.”

For the details of the plan proposed by Dr. Peddie for bringing compulsion and legal restraint on the class of persons whom he too well describes as gradually suicidal maniacs, as well as pests to society at large, we must refer to the Appendix, wherein those details are fully given.

Without expressing our individual opinion on the entire plan, we beg to commend its attentive perusal to the consideration of all concerned, not only in the amendment and cure of the class referred to, but in the best interests of our common humanity.

12. The design of this tractate, published at the request of the Philosophical Society, to whom it was addressed, as stated at its commencement, by its author, Dr. Jamieson, “is to illustrate the presumed course of nervous movement concerned in the mental phenomena which are associated with the brain;” and in it the non-professional reader will find much to instruct and direct more advanced inquiry, while even the well-read psychologist will discover hints and suggestions which may be practically useful. The author is enabled (as he expresses his desire at the outset of his paper) to steer altogether clear of the *materialist* school; while at the same time he follows, in the line of scientific investigation, the guidance of physiological inquiry, and arrives at what we believe to be true and tenable conclusions as regards the operation of matter on mind, with its results. We strongly recommend this elementary discourse to all who are interested in the exalted subject of which it treats, and who may not have access to more voluminous treatises on the same. We have only room for the concluding portion of our learned author’s pamphlet, which will give our readers some idea of the manner in which he has handled his theme:—

“The steps through which we trace the growth of the human mind are from organic movement to consciousness, from consciousness to volition, from volition to reason, from reason to the capacity of acknowledging a guiding power beyond the limits of organic life. We have looked upon phrenic effort as commencing in mere reflex action, and carried upwards successively through instinctive manifestation, voluntary motion, and rational action, to the development of a will capable of desiring to act in unison with a holier will. Humanity is the highest phasis of the relation of spirit to matter in this world, and is the human mind for all philosophic

apprehension of psychology. At the base is a vitality which is simply uterine; above that, merely animal; farther forward, only foolish; above this, diabolic; and, only when transcending mere intellectual power, graduating at humanity, and becoming capable of a life which may blossom as Christian in this world, and sow the seeds of a development that will yet be more godlike, and of a life that will be immortal in heaven."

13. The Directors of the Perth Asylum seem to be of the pachydermatous tribe of animals, no ordinary spurring appearing to be of the least avail in forcing them to give an account of their stewardship in the fiscal way, which is the principal duty they have to discharge to the public. Nothing short of the free application of the Hebrew lamedh, or ox-goad, will answer for directors of their genus; and accordingly, the unpleasant duty again devolves upon us of calling attention, as we have done on so many former occasions^a to the strangeness of their continuing to withhold any or the least information of the distribution of the large funds with which they are intrusted. We hope this renewed hint will not be lost on the Directors, who *naïvely* inform us on the present occasion, that "no exertions have been spared on their part, both by a judicious expenditure of money, of introducing improvements, and by their own personal superintendence, to render it (the Asylum) worthy of the confidence of the public."

Had they given the particulars of this "judicious expenditure," we could have let pass for what it was worth "their own personal superintendence," and drawn our own conclusions as to their account of the former being deserved; but as they have not, we opine that the "confidence of the public," with our own, will be suspended until this needful information is forthcoming. The Report proper of the Dundee Asylum, so ably drawn up by Dr. Lauder Lindsay, its highly talented and most energetic Superintendent-Physician, we have read with unmixed pleasure, and no small profit. Its entire contents do him infinite credit, and greatly should the directors prize him as their chief, and consider their institution fortunate in no small measure by having so worthy and so well qualified a member of our profession, as its head, to fulfil the all-important behests reposed in his hands. The annexed extracts, and they are not a tithe of what might be given, are equally worthy both of perusal and study by our readers, and will bear us out that we have not overstated the value which is to be attached to this elaborate Report of Dr. Lauder Lindsay:—

^a See Reviews on Insanity in our November issues for 1854, 1855, 1856, and 1857

“General Paralysis.—This is a term, we believe, liable to be greatly abused or misunderstood. It is too commonly and loosely used to include all cases of paralysis occurring in the insane, or at least those associated with exaltation of ideas, or with the monomania of pride, vanity, or ambition. The name is somewhat unfortunate; for in one, and that the most characteristic stage, the paralysis is local and limited—partial in extent; and, moreover, ordinary and spinal paraplegia sometimes merges into paralysis as general as this can be. Nor is it marked by a specific pathological condition; and it is not invariably associated with, nor characteristic of, particular forms of insanity. The term ‘general paralysis,’ we believe, ought either to be more rigorously defined than at present, or it should be abolished. It has occurred to us to see many mistakes made from the too vague use of this term, which is frequently a most important one in medico-legal cases. In courts of law it is possible that the lawyer and the medical witness may differ as to the interpretation which they put upon these two words. The lawyer regards the ‘general paralysis of the insane’ as necessarily incurable, and as necessarily implying death at a period of not more than two or three years from the origin of the disease. By using this term, then—unless the medical witness otherwise and rigorously define the sense in which he employs the word, he will be held to commit himself to this view of the prognosis—a view which his evidence may variously contradict.”

“Many of the ordinary physical diseases of the sane become most insidious and exceptional in the insane; their character appears to be masked or obscured by an inertia or torpor of the nervous system. Their frequently typhoid type is another feature worthy of note; while a third is the frequent absence of irritative or symptomatic fever. We have sometimes known no complaints made, have seen no external evidence of pain or suffering in acute phthisis—‘galloping consumption’—where the subsequent necropsy proved the lungs to have been riddled with vomicae, full of pus; in phlegmonous erysipelas, going on to the formation of enormous collections of pus in the limbs; in pneumonia, where the lungs were solidified and normal respiration was impossible; in organic diseases of the heart; in gastritis and other diseases.”

“Frequently cerebral disease would appear to be vicarious, or, in other words, it takes the place of, and alternates with, diseases in other parts of the body. This phenomenon has been chiefly noticed in connexion with phthisis. The latter is one of the most common complications of insanity. It often happens where insanity and phthisis, or—perhaps we may be allowed to say, assuming, for the sake of illustration, the pathology of the cerebral disease—tubercular or scrofulous disease of the brain and lungs, coexist in an individual, when disease in the one organ is prominent, that of the other is in abeyance. That is to say, where and when the phthisis becomes acutely developed, the patient becomes *pro tem.* sane; and, on the other hand, when the pulmonary disease is overcome or re-

trogrades, insanity again appears, frequently in the form of a paroxysm of acute mania. *Apropos* of phthisis, we may further state that the scrofulous diathesis frequently manifests itself differently in different members of a family. One may be a lad of precocious talents, giving promise of the highest future distinction, but withal of an extremely sensitive nature, and possessed of a delicate nervous or nervo-sanguine temperament; a second may be of a very lymphatic temperament, and suffer from scrofulous sores of the glands of the neck; a third may die young of phthisis; a fourth may be insane; and a fifth, a drunkard or a prodigal."

"It is very certain, though it does not admit of definite statistical proof, that dyspepsia, that protean and heterogenous group of gastric maladies, is frequently the precursor, if not the cause, of insanity; interfering, as it does, more or less directly, with the due nutrition of the brain."

"1. That the size of the skull in the insane (excluding the class of idiots) does not materially differ from its size in the sane.

"2. That no relation can be traced, in the generality of cases, between the size or form of the skull and the different types or phases of insanity.

"3. That, though peculiarities of conformation of the skull certainly frequently exist, they do not bear any fixed relation to the types or phases of insanity.

"4. That similar conformational peculiarities are probably equally common, or nearly so, in the sane.

"5. That in a large proportion of cases the cranial development is decidedly good, and the conformation of the head apparently normal and regular.

"6. That the size and form of the head are therefore *per se* fallacious criteria in the differential diagnosis of insanity."

"The etiology of insanity is a subject of great importance as bearing on its proper prevention and cure. Important lessons may be learned in the daily history of every asylum. The sections pertaining to *causes* in the Tables appended to this Report are comparatively valueless—as all such Tables necessarily are—from the imperfect and unsatisfactory data on which they are founded; it were profitless, therefore, minutely to analyse them. But there are causes undoubtedly operating daily on the large scale—causes which society may do much to prevent or annul—and some of which, in ignorance, prejudice, or obstinacy, it does not exert itself to prevent or abolish; and to these we deem it not unworthy nor unnecessary briefly to direct attention. For we regard it as a duty—though, withal, frequently a disagreeable and thankless one—incumbent on the superintendents of asylums to point out to society the grand public lessons which the histories of such institutions teach. It is only one part of the duty and privilege of these officers—one part of the use of such institutions—to cure insanity. Not a less important duty or use is that of contributing, in however small a degree, to the prevention of insanity—to the purging from out so-

ciety of the unhealthy or morbid elements which predispose thereto. No year passes without abundant proof of the hereditary nature, or hereditary transmissibility, of insanity. Of 69 admissions, hereditary predisposition was proved in 17, 13 females and 4 males—the female sex, therefore, largely predominating in the proportion of more than 3 to 1. In one of these cases the mother was insane; in 2, the father; in 1, the father and brother; in 2, a brother; in 6, sisters; in 1, the maternal uncle; in 1, the paternal uncle; in 1, a half-uncle and aunt; in 1, a grandfather's cousin; and in 1, the family generally were eccentric or insane, according to the views taken as to what constitutes insanity and eccentricity respectively.”

“Intimately connected with this subject is the delicate and painful one of the intermarriage of tainted persons, especially of tainted females—of women labouring under, or predisposed to, insanity—and whose offspring are more than likely to manifest insanity, or at least to bear about with them a strong predisposition. We cannot too strongly reprehend the practice in parents or friends, of wilfully concealing from an intending husband or wife the fact of existing or prior insanity in the opposite contracting party. Such practice is not only cruel, but criminal; it is perpetuating and propagating insanity broad-cast; it is burdening the country with the helpless and diseased; it is—to use a phrase which, if plain and homely, nevertheless embodies a great and wholesome truth—‘deteriorating the stock’ of society. One lamentable instance came under our notice during the year. A woman was brought here for the second time, whose house, on the evening preceeding her admission, had presented the following scene:—In one apartment lay a dying husband, cursing, with his last breath, the day he had been married, and lamenting bitterly that he had not been made aware that he was allying himself with a tainted woman. His simple and pathetic story was this: in his youth he had had an attachment for her as a girl; he spent some years abroad as a soldier; on his return, finding her still unmarried, he renewed his former attachment, and was permitted to propose marriage without being made aware, either by her or her friends, that, during his absence, she had had one or more attacks of insanity. They were married, and subsequent attacks soon opened his eyes to his wife’s morbid tendency: from that day to the period of his death he never ceased to allude to his alliance as the curse of his life. In an adjoining apartment, a son—an indolent ‘ne’er-do-weel,’ who had never exerted himself for his own support or that of his parents—had just committed suicide, on being told that, in consequence of his father’s approaching death, he would be compelled to work. A daughter had just come home to this scene of misery to be confined of an illegitimate child; while the mother was rushing from room to room, raving mad, and unable to comprehend the scene in which she was so prominent an actor. But, strange to say, similar marriages are sometimes deliberately solemnized among the educated and higher classes of society, when both parties have their eyes open. Such *mésalliances* are, however, much less

seldom marriages of love than of convenience: there is probably, in general, money to be got on one or other side. The parties entering into such compacts are inexcusable on the plea of ignorance of the fearful results of such mal-assorted and unnatural unions. It is a delicate and difficult thing to interfere with civil liberty; but it admits of a reasonable degree of doubt whether there should not be some legal restriction in regard to such marriages. Their effects are most disastrous to society at large; and surely society, which bears the burthen and suffers the penalty, has a right to enter some species of practical protest against proceedings, which are contrary to physiological, as well as to moral, law. The propagation of insanity by means of fatuous and facile female paupers is now amenable to civil law. This subject we may safely leave in the hands of the new Lunacy Board. Such females are comparatively seldom married: their lives are too frequently of the most irregular and dissolute character. More than one deplorable instance has occurred to our notice during the year.

“We are naturally led from the subject of marriages among the insane to consider celibacy as a predisposing cause of insanity. Of 69 admissions during the past year, 49 patients have been unmarried, 17 married, and 3 widowed; or, in other words, the single have been considerably more than double the number of the married. But as the statistics of a single year may exhibit somewhat unusual or fallacious results, we have examined our statistics, bearing on this subject, for the last 31 years; and we find, as the result, that of a total of 679 cases, in which the social condition has been specially noted, 445 have been single, 196 married, and 38 widowed: that is, the single have constituted 65·54 per cent., and the married and widowed together 34·46 per cent., of the whole admissions; or, in other words, the former have been nearly twice as numerous as the latter. It is but fair to state that the statistics of a single asylum may be as fallacious—in relation to society at large—as those of a single year in any given asylum. The statistics of other asylums do show different results. Those who are sceptical as to the value of statistics go the length of asserting that they may be made to prove anything! We trust society has a right to expect that this and similar inquiries and subjects will be elaborated by the new Lunacy Board for Scotland, one of whose most useful duties we take to be the drawing up of statistics from the returns which Government compels the officers of asylums to furnish. Such is the public interest attachable to celibacy as a predisposing cause of insanity that we venture to compare our results with those arrived at by some of the first authorities—British and foreign—on the statistics of insanity, and to draw or deduce a few general conclusions therefrom. The statistics of Bethlem Hospital for the insane, London, according to Dr. Hood, show that the married are more numerous than the single patients in the proportion of 1364 to 1194. This, however, is certainly an exceptional state of matters. Opposite results are given in Bucknill and Tuke’s ‘Manual of Psychological Medicine,’ and

in the statistics of the majority of the British and foreign asylums. In the Salpêtrière and Bicêtre during 20 years ending in 1822, according to M. Desportes, of 2490 patients, 1472 were single, and 956 married, widowed, or divorced. Jacobi's statistics of insanity in Germany show that, of 2015 patients, 1573 were single, and 422 married or widowed. Statistics then, on the whole, indubitably prove that celibacy predisposes to insanity, and also the converse—that matrimony is, to a certain extent, an antidote against insanity, or exercises a preservative influence."

We are unable to devote more room or attention in this Review to the Perth Asylum than to state, that the patients treated in it for the year were, in the aggregate, 224 (115 males, 109 females,—here again the males are in excess, contrary to what usually prevails); that those discharged, recovered and improved, were 17 males and 14 females; ditto, "unimproved," 3 males and 1 female. The deaths were, 11 males (a large ratio as compared with the females) and 3 females, and the causes are thus stated:—Apoplexy, 3 (males); phthisis, 3 (2 males, 1 female); diarrhœa, erysipelas, exhaustion, hepatitis, cancer of liver, heart disease, and gastritis, each 1, (6 males and 1 female). Remaining under treatment at close of year (June, 1858), 175 (84 males, 91 females,—here the females have the preponderance). Appended to the Report is one from the chaplain, which is marked with more common sense and professional disinterestedness than we usually find in such productions, but which, for our own part, we conceive is entirely out of place in these Reports, equally so as those of the Commissioners in Lunacy and Inspectors, to say nothing of matrons, which should be for the board-room alone.

14. We have read with much satisfaction Dr. Wingett's valuable Report of the Dundee Asylum, of which he has been for a series of years the chief officer and Resident Physician, and whose management of the establishment, in all its details, continues to uphold for it the high character it has ever maintained amongst kindred institutions in Scotland. His immediate predecessor was Dr. Alexander Mackintosh, the present able and skilful physician of the Glasgow Asylum, during whose incumbency at Dundee that establishment prospered so happily and increasingly, that a larger and more responsible sphere of usefulness, as at his new seat of government, was deservedly his reward. The Dundee Asylum, like all the other chartered or public asylums of Scotland, is not confined to pauper patients exclusively, but provides accommodation also for the wealthy and educated classes, in an entirely distinct

establishment, however, on the premises, in which all the comforts and luxuries of refined life are provided on the most liberal scale, as we ourselves have had opportunities of witnessing. This is a system which has been in operation in Scotland for a lengthened period,—the mixed asylum system,—and has worked in a manner that cannot be denied as being fraught with the best and most successful results, and appear to us well worthy of extension, and of public support and confidence throughout the United Kingdom. Dr. Wingett has some sensible and judicious remarks in his Report on this subject, which being one that, at the present time, is attracting a large share of general attention, we think deserving of reproducing here *in extenso*:—

“The opinion prevails in some quarters, that the residence of patients of the upper and lower classes in the same asylum is objectionable, and that separate establishments should be provided for their accommodation. This opinion is grounded upon the supposition, that the rich and refined must experience a certain degree of repugnance at the idea of the propinquity of their lowly and less favoured fellows. The experience of this institution has afforded abundant and ever-present evidence of the groundlessness of this notion. No such feelings are ever manifested by the upper classes. They uniformly regard such incorporation of different ranks of individuals in precisely the same spirit with which they have been accustomed to regard it in the community which they have left. They perceive the same classes of society within as there are without. The distinctions of rank are, however, preserved; separation, as regards residence, is effected; and the pursuits and privileges of all have their appropriate limits assigned to them. No association or mingling takes place other than that which is desired by each individual, or which may be prompted by the ordinary motives which bring the rich and poor into contact in every-day life. Benevolence and sympathy bring about a certain amount of voluntary communication among the different grades, highly conducive to the health and happiness of all. It is matter of certainty that this juxtaposition of classes has a great deal of influence in augmenting the general prosperity. It is of daily occurrence that a variety of patronage is exercised by the rich to the advantage of the poor. Here, as elsewhere, rank adopts its pensioners and proteges; cast-off dresses and remainders of dainties are given away; and the diffusion of these little benefits among the poor affords both occupation and gratification to the donors. In fact, the establishment is regarded by all in the light of a small parish. One church unites all grades of worshippers; and a common affection tends to inspire a feeling of condescension and friendly attachment, rather than impatience on account of the poor being tolerated as neighbours. Judging from the experience of this institution, it is certain that the upper-class insane would repudiate this feeling which has been attributed to them, and regard the iso-

lation of their poorer fellows with deep regret. This juxtaposition of classes has always been a pleasant feature in the constitution of this Asylum, and fruitful in means of promoting harmony and contentment. The poorer classes are, however, the greatest gainers by this arrangement, seeing that they are thus the recipients of courtesies and kindness, having nothing but gratitude and respect to give in return. I have long been convinced that this is the best and most effective plan upon which a public asylum can be organized; and in the prospect of extended accommodation for the insane of Scotland, I sincerely trust that the benefits realized by this institution, with its admirable system of incorporation of classes, will not be lost sight of, out of preference for any cold and inexperienced proposals to improve upon existing arrangements, by separating patients into distant and unsympathizing groups of rich and poor."

The number of patients treated during the year in this establishment amounted to 259; 145 being males, and 114 females—another exception it may, in passing, be remarked, to the rule of the men exceeding the women in number.

The discharges, &c., of the above, were as follows:—

	M.	F.	T.
Discharged, cured,	11	10	21
Do., improved,	0	1	1
Do., by desire,	1	4	5
Died,	11	3	14
	<hr/> 23	<hr/> 18	<hr/> 41
Remaining, ,	122	96	218
	<hr/> 145	<hr/> 114	<hr/> 259
Daily average number of patients,	122	96	218

The assigned causes of disease of the patients admitted during the year were:—

	M.	F.	T.
Disappointment,	6	2	8
Fever,	0	1	1
Epilepsy,	0	1	1
Drunkenness,	3	0	3
Injuries of the head,	3	1	4
Unknown,	16	16	32

The forms of disease were:—

	M.	F.	T.
Mania,	6	3	9
Dementia,	12	9	21
Monomania and Melancholia, . .	8	9	17
Idioey,	2	0	2
	<hr/> 28	<hr/> 21	<hr/> 49

The causes of death were:—General paralysis, 5 (males); marasmus, 2 (1 male, 1 female); phthisis, 3 (2 males, 1 female); bronchitis, disease of heart, gastritis, and cancer, each 1 (3 males, 1 female).

The year's expense are fully given, and amounted to £4585 0s. 5d. No tobacco appears to be permitted to defile the establishment, which is another good feature in its superior management.

15. The authorities of the Aberdeen Asylum having changed the ending of the year of its Medical Report, from March, as it had been, to December, in order to conform to the regulations of the new Lunacy Act for Scotland, the Report last issued, and now before us, embraces but a period of nine months. The results for that time were as follows:—

	M.	F.	T.
Patients in Asylum, April 1, 1857,	144	148	292
Admitted during the year, . . .	35	49	84
<hr/>			
Under care and treatment during the year,	179	197	376
Removed during the year:—			
	M.	F.	T.
Recovered,	24	26	50
Improved,	3	0	3
Unimproved,	5	3	8
Dead,	5	16	21
	—	—	—
	37	45	82
<hr/>			
Remaining in Asylum, Dec. 1, 1857,	142	152	294

Social Condition of Patients admitted.

	M.	F.	T.
Single,	20	28	48
Married,	15	12	27
Widowed,	0	9	9
	—	—	—
	35	49	84

Form of Insanity in Cases admitted.

	M.	F.	T.
Amentia,	1	1	2
Mania,	11	19	31
Dementia,	11	10	21
Melancholia,	7	12	19
Monomania,	5	7	12
	—	—	—
	35	49	84

Employment.

	M.	F.	T.
Gardening,	42	0	42
Workshops,	10	0	10
Needlework,	0	39	39
Knitting,	0	9	9
Laundry-work,	0	20	20
Domestic-work,	6	32	38

The year's expenditure embraced the following items, amongst which it will be seen that tobacco does not form one; but, on the other hand, washing is charged at £57 13s. 5*d.*, which surprises us (seeing that 20 females are engaged in the laundry); unless that the amount under that head means washing materials, as we presume it must:—

	£	s.	d.
Provisions,	2794	6	5
Fire and light,	370	12	11
Washing,	57	13	5
Medicines,	38	10	8
Wine, spirits, and porter,	73	17	8
Repairs,	413	0	2
Furniture and bedding,	236	12	0
Salaries to Medical Officers,	400	0	0
Do. to Chaplain,	50	0	0
Do. to Treasurer,	130	0	0
Do. to House Steward,	77	10	0
Do. to Matron,	70	0	0
Servants' wages,	568	7	10
Incidents, insurances, printing, stationery, and Annuity,	233	11	3
Interest,	339	17	0
Clothing for pauper patients,	279	10	0
	£6133	9	4

The causes assigned for the death casualties during the year were:—Exhaustion, 5 (3 males, 2 females); phthisis, 4 (1 male, 3 females); paralysis, 3 (two males, 1 female); disease of brain, 3 (females); ileus, 2 (1 male, 1 female); cancer, disease of heart, and jaundice, each, 1 (2 males, 1 female).

Dr. Jamieson, the very efficient head of the establishment, thus summarizes the proceedings for the period embraced in his practical Report:—

“The experience of the [nine] months now reported upon, I am glad to say, has been very favourable to the character of the house as hitherto upheld by medical results: the admissions have been 84,

the removals, 82; the gross number under care and treatment, 376; and the average resident number, 299. The recoveries have been equivalent to nearly 60 per cent. on the admissions, and the deaths to 25. The former is a very high average—the highest, indeed, that has been recorded in the history of the institution, with the exception of the year 1854; the latter, viz., the number of deaths, is, however, rather above the average. It is worthy of being noticed, that a number, equivalent to half of the patients admitted during a period embracing the last six years, has during that time left the hospital, recovered: a ratio very remarkable as occurring in an Asylum admitting all descriptions of insanity, even the most hopeless.”

The following interesting extract, giving a short history of the creditable antecedents of the Aberdeen Asylum, is the only further one we can afford space for on the present occasion:—

“ This Report, short as it is, and more than usually brief the period to which it alludes, may yet seem to have a special interest connected with it, as summing up the results attained from a local provision made nearly sixty years ago, and since so efficiently developed and upheld for the accommodation, treatment, and relief of those afflicted with what is, in the feelings of most, the saddest of human ailments.

“ At the time that Parliamentary enactment first compelled an adequate degree of attention to be paid to the welfare of the insane in Scotland, Aberdeen was found already possessed of a self-supporting Asylum, containing 300 inmates, cared for by the services of a staff of about 40 officials, attendants, and servants, of various descriptions, and consisting of extensive buildings, in large part new, and set down in about twenty-five acres of ground, gradually acquired; that it contained upwards of 200 of the pauper lunatics of the town and district, and nearly 100 other cases, many of them of indigent, but not parochial insane, accommodated through benevolent funds connected with the institution at a low rate; that the treatment pursued in it was in harmony with the most advanced views; that the accommodation afforded to pauper and necessitous cases was, on investigation, admitted to be comparable to, and in respect of combined comfort and economy before, any other in Scotland at the date; and that, by the previous existence of the Hospital, the Lunacy Board for the district found on its establishment that it had it in its power to save the county from heavy and unlooked-for assessment and taxation.”

16. The Pennsylvania Hospital for the Insane Annual Report for the year 1857, by its Physician-Superintendent, Dr. Kirkbride, is, as usual, well drawn up, giving a full account of the year's proceedings, which have much interest and informa-

tion for those engaged in the treatment of the insane, as well as the general reader besides. The Report states, that the total number of patients in the hospital during the year was 364 (177 males, 187 females). Those discharged cured amounted to 74; and 43 were removed in different stages of improvement. The deaths numbered 17 (14 males, 3 females); 3 were the result of acute mania; 4, softening of the brain; 4, from gradual exhaustion induced by the combined action of long-continued mental excitement, want of sleep, and a refusal of food. There was one case of suicide, the particulars of which are not stated, but which we consider should always be given, as suppressing the facts in connexion with those unfortunate but unavoidable casualties in hospitals for the insane, or using any mysterious silence in connexion with them, is only calculated to produce an unfavourable effect, which, however, a contrary course of procedure would entirely prevent. The other causes of death were,—1 each of dysentery, congestion of the brain, diarrhœa, phthisis, and sloughing ulceration.

After making some sensible observations in reference to the due employment and amusement of the patients in an asylum, Dr. Kirkbride goes on to say, and with much truth:—

“An interest in having the patients pleasantly occupied—after a kind, courteous, and uniformly cheerful disposition in all intercourse with them, and for which no other qualifications can be a substitute—is, indeed, one of the most desirable traits in those who have the care of the insane.”

No deficiency in this respect would appear to prevail in Dr. Kirkbride's Asylum, a great variety both of occupation and amusements being provided for them. During nine months of the year regular entertainments, or lectures, on three evenings in the week, are given. We conclude our notice of the Pennsylvania Asylum with the annexed extract, which is so entirely in accordance with our frequently expressed views on the subject to which it relates, that we would beg to recommend it to the serious consideration of all parties whom it may concern on this side of the Atlantic,—those parties whose aspirations are so strongly in favour of nothing short of a file of official chaplains representing the several religious denominations being, *nolens volens*, attached to our hospitals for the insane, which are nearly similarly circumstanced as to varieties of religion as the Pennsylvania establishment, and which should be similarly dealt with:—

Observance of the Sabbath.—Our proximity to a densely settled neighbourhood enables us to allow those patients for whom it is

believed to be desirable the privilege of attending such divine worship, on the first day of the week, morning and afternoon, as they had been accustomed to previous to their entering the hospital. In the evening the patients generally assemble in the large rooms in the centre building, where portions of the Holy Scriptures are read to them by the officers of the institution; and, in certain wards, reading of the same kind is regularly done by the teachers. As no visitors are admitted on this day, and all unnecessary labour is avoided, it has long been a subject of remark, that the quiet and repose about the whole establishment, which is then almost always to be observed, is very striking. This seems to be attributable to a deep-seated respect for the day, the effect often, no doubt, of early education, and which is not entirely lost even when disease has taken from the mind some of its highest attributes. On the Sabbath no leave of absence is granted but to attend divine worship, and throughout the grounds, in the shady groves and pleasant summer-houses, as well as in the wards, our inmates seem to appreciate the quiet and repose that rightfully belong to the day. This mode of observing the Sabbath was commenced, after mature reflection, at the opening of this institution, and extended observation of its effects; and a full knowledge of all that has been done elsewhere, convince me that for this hospital, and for the patients who are received here—embracing individuals of nearly every religious denomination, and often with strong attachments to their own views—it is the best that can be adopted.”

17. The present Superintendent-Physician, Dr. John P. Gray, of the Asylum of the State of New York, has not favoured us with copies of his Reports with the same regularity as his able predecessor, Dr. Benedict. The last one we received was the tenth, and this is the fourteenth. As far as we ourselves are in question, this is a matter of no concern whatever; but if professional men, engaged in the practice of psychology, desire that their labours should be noticed in our Annual Review, they cannot expect that this entirely voluntary act will be done unless they transmit us their Reports, our invariable rule being to include none in our list but such as are duly transmitted to our editorial address. To judge from the handsomely executed engraving in the frontispiece of this Report, of the New York State Asylum, it must be a very imposing building of its kind. But its height is against it, exceeding even three storeys,—the three-storeyed asylums in England being objected to, and with good reason, by those who are best qualified to give an opinion on this important point of detail, two storeys being considered the proper elevation, both for sanitary purposes and for the better inspection of the establishment.

The number treated for the year in the institution was 697 (371 males, 326 females), the disposal of whom is thus stated:—

	M.	F.	T.
Discharged, recovered,	59	41	100
Do., improved,	20	13	33
Do., unimproved,	32	33	65
Not insane,	7	1	8
Died,	22	8	30
	<hr/>	<hr/>	<hr/>
	140	96	236
	<hr/>	<hr/>	<hr/>
Remaining under treatment,	231	230	461

It is observed by Dr. Gray, regarding those discharged "unimproved," that the removal proved beneficial, "in some instances being not only no burden or special care, but actually useful, and a source of comfort to their friends." Mention is made of a form of continued fever merging into a marked typhoid type, which prevailed to some extent, twenty-six cases occurring, which was found to arise from mephitic air, from numerous rat-holes opening directly beneath the windows of certain dormitories, and communicating with the main sewers. The cause being removed, the fever ceased, not, however, without proving fatal in three cases, one being a patient, and two employés. The other causes of death were:—Exhaustion from mental disease, 7 (6 males, 1 female); general paralysis, 6 (males); phthisis, 5 (3 males, 2 females); epilepsy, 2 (males); malaria cachexia, 2 (males); suicide, 2 (1 male, 1 female); nephritis, 1 (male); fibrinous concretion of heart, 1 (male); ovarian dropsy, 1 (female); gangrene of lungs, 1 (female); old age, 1 (female). Total deaths, 30. We have the same observation to make here as when analyzing the Pennsylvania Report, namely, that of the suicides, which unhappily were 2, being passed over in studied silence, or merely given in the mortality list as ordinary cases of death, which we must demur to, and strongly advise our Transatlantic brethren to be a little more explicit in the event of so much to be deprecated an occurrence again taking place in their admittedly well managed institutions. We consider that this departure from the rule invariably pursued in our hospitals for the insane at home, under similar circumstances—that of affording the fullest information of so unfortunate, but, as we have already mentioned, so unavoidable an event, be the means what they may to prevent it—is doing a great injustice to the Superintendents themselves, and placing them in a false position before their brethren. We hope these

suggestions, on a delicate and painful subject, will be taken in the same good and friendly spirit in which they are given.

18. Dr. Joseph Workman, the able and efficient Physician-Superintendent of the Provincial Hospital for the Insane at Toronto, Upper Canada, has favoured us with copies of his excellent Reports from July, 1853, to March, 1858, addressed to the Legislative Assembly of the Province of Canada. We are glad to find a countryman of our own, an Irishman, occupying so responsible and important a position in our British possessions in North America, and, judging from the official documents before us, and the great candour and no less spirit of independence, as well as professional zeal, in which they are written, we must conclude that the Toronto establishment has at its head a well chosen and most excellent Superintendent in the person of Dr. Workman. On the occasion of Dr. Workman taking charge of his Institution, in July, 1853, the number of inmates was 345, of whom 187 were males, and 158 were females. At that period the general health of the Asylum was far from being satisfactory, and our only surprise is, from what follows in the Report, that a plague had not broken out within its walls, and the patients committed to its pestilential agencies—certainly no care which implies due provision having been made for their health, treatment, and comfort—swept off wholesale from this side of the grave. On this extraordinary state of things Dr. Workman states:—

“Every apartment abounded with foul air, and it was found that beneath the basement floors, covering a space of 600 feet in length, by 30 to 100 feet in breadth, there had, from some undiscovered cause, accumulated a mass of filth and impure fluids, the stench from which, when first exposed, was so insufferable and overpowering as instantly to sicken several of those who, including the Visiting Commissioners, chanced to inhale it. The undersigned could not obtain from any available source of information, whether architect, builders, or operatives, who had been employed in the erection of the House, or officers and servants in the establishment, any adequate explanation of the existing evil. There could, however, be no doubt, as to the pestilent influences of the nuisance, and no physician having a due regard for the lives and health of his patients, or for his own reputation, could tolerate its continuance. In the eastern division of the house, beneath the kitchens and adjoining parts, the filth was found to measure from three to five feet in depth, and was of varying consistence, from that of dense mud to thin molasses. The superjacent floors and joists were so rotten as to yield under every passing foot, and in several places had given way, leaving openings from which issued the most offensive effluvia. A rank fungous

vegetation hung from the under surface of the decayed timbers. The dry rot had seized the wood skirtings, and other parts above, and extended into the upper storeys, where it is likely to continue its ravages. But, however pressing was felt the necessity for an exploration and cleansing of the foundations, it was deemed exceedingly hazardous to undertake the work during the summer or autumnal months. No greater evil could probably result from the continuance of the nuisance, in its present state, than from its exposure and agitation in the process of removal. This conclusion was amply verified, even in the cold weather of November, December, and January, when at length the accumulated filth was disturbed and carried to a proper distance outside. The health of the inmates, as well the lunatic patients as the officers and servants of the Institution, was much affected, and continued so until the whole work of cleansing, repairing, and altering the basement was completed. The cause of the bad state of the foundation was discovered to have been a defect in the deep drainage, of a most unaccountable character. The interior drains from the kitchens, laundries, and other parts, being followed from their sources to the points of emergence from the building, were here found to be further impenetrable, having never been carried out to the main sewer, which was at the short distance of 22 feet. The remedy for this evil was palpable, and was promptly applied."

Again we find, that, lethal as the surrounding atmosphere was in this devoted institution, one under the immediate direction and control of the Provincial Parliament, the water was nearly as potent in doing the work of havoc to the lives of her Majesty's mentally afflicted subjects at Toronto, as the following extract will show:—"The water supplied to the Asylum by the forcing-pumps on the bay shore is not less impure than the air of the rooms. It is drawn from the lake at the distance of only sixty yards from the mouth of the main sewer, which carries off all the filth of the privies, laundries, and sinks of the establishment." The means of classification are stated "to be so defective in arrangement as to render the institution comparatively inefficient as a curative establishment;" and, as if all these evils were not sufficient to try the temper of the most patient physician in the world, another Protean head is reared through the "introduction of criminal lunatics from the Provincial Penitentiary and the county jails." It is an outrage against public benevolence and an indignity to human affliction, as Dr. Workman properly observes, "to cast into the same house of refuge with the harmless, feeble, kind-hearted, and truthful victims of ordinary insanity, those moral monsters which nature sometimes seems to have formed, for the purpose of teaching us the inestimable value of the constitution with

which the species has been blessed ; or, yet worse, those villains who affect insanity as a means of evading the just punishment of the most atrocious crimes." In a subsequent Report (1856) Dr. Workman is enabled to mention the removal of the male criminal lunatics from the Asylum "as a blessing to the institution, the true value of which could be appreciated only by those who were cognizant of the extent of the evil caused by their presence." This we can well understand, for we have had experience of a similar grievance, and the inestimable advantage and comfort which resulted from a *total separation* of such inmates from the ordinary patients, which has been effected in Ireland by the establishment of the Central Asylum at Dundrum, by Act of Parliament in 1845, and now being carried into operation in England also, after a long struggle to accomplish the same desirable separation. In his Report for 1857, Dr. Workman is enabled to state the gratifying improvement which had taken place in the general health of the Asylum as follows:—

"On my assumption of the duties of Medical Superintendent, dysentery was, and I believe long had been, a very formidable endemic of the Asylum. Erysipelas had been a regular and very perplexing winter visitant. An indigenous cholera, not less malignant and fatal than that of India, had found, in the substratum of filth by which the whole foundation was underlaid, a genial soil. Were proof at this day wanted of the fact, that cleanliness is the surest safeguard against pestilence, it might be had in a comparison of the present and the former state of the basement and other parts of this house. Since the general cleansing of the establishment, and the completion of the drainage, not a single case of fatal dysentery has occurred, and very few cases, even of the mildest form, have been observed. Erysipelas has entirely disappeared, and under the blessing of Providence, in the last visitation of Asiatic cholera in this city, the Asylum entirely escaped this dreadful scourge."

After referring to the deaths in ordinary which occurred in the house, the same not being ascribable to any morbid agency peculiar to it or the locality, but rather the result of pre-existing and frequently long-continued formidable organic disease, as was found by post-mortem examinations, which he had been in the habit of conducting in nearly every case of death (the interesting particulars of a large number of which are embodied in the Report), and stating his belief that insanity is never associated with perfect bodily health, and in the majority of cases dependent on physical debility,—a belief in which we entirely concur,—Dr. Workman goes on to say :—

“It is very much to be desired, with reference to the latter fact, that the true character of the malady, and its most appropriate treatment, were better understood by the medical profession at large, but especially those of the more remote country settlements. Many patients come to this Asylum in a very reduced state, and not a few have been placed beyond the reach of curative means in consequence of the active and depressing therapeutic measures which have been adopted by their physicians. Blood-letting, purging, vomiting, salivation, blistering, cupping, setons, low diet, and the whole battery of medical destructives, have been exhausted; and it is fortunate if the patient has fallen into the hands of only one of this class of psychologists. The most promising cases are generally those for which least has been done. Were generous diet, well-directed kindness, exemption from bodily restraints, moderate exercise, and in many cases a judicious allowance of wine or alcoholic beverages, substituted for the present erroneous medical treatment, a very large proportion of those who are now sent to this Asylum would recover at home, and many who are rendered incurable for life might be saved from so melancholy a doom.

“In expressing this opinion, I am well aware that I am sustained by the unanimous voice of the entire body of medical superintendents of lunatic asylums, both in America and Europe: scarcely a Report from any institution for the cure of insanity reaches me in which the subject of inappropriate treatment before admission is not alluded to, and the evil result deplored.”

We have only to say that we believe the caution contained in the above, as to the serious consequences resulting in the use of depressing agencies in the treatment of insanity outside the walls of an hospital for the insane, is most just, and should be duly attended to by all practitioners at home as well as abroad.

Having gone so much at length into Dr. Workman's first Report, embracing a period of four years, we have left ourselves room for little more than a mere glance at his more lately issued one—namely, that for the year ending 1st March, 1858, at which period the number of patients remaining in the house was 466 (215 males, 251 females); and the total treated during the year, 594; the new patients admitted for that period being 166. The year's discharges were 89, and the deaths, 34. Of the patients who remained under treatment, 397 were in the Chief Asylum, and 69 in the University Branch Asylum, an auxiliary establishment provided as additional accommodation for chronic and harmless patients, chiefly females, which had succeeded so admirably that another adjunct of the same kind was strongly recommended. This Report forcibly calls attention to the great want of asylum accommodation for the

wealthier and more respectable insane, their friends being necessitated to sue for admission for them "at the portals of the public institutions of their republican neighbours, praying for that decent and comfortable accommodation which their own wealth had not provided, or the semi-barbarism of their own land had yet denied."

Dr. Workman would appear to have had his share of trouble with the subordinates of his large Asylum also, being nothing better off in this respect than his brethren in the mother country. On this subject we subjoin the following extract, with which we must take leave of his very spirited and ably written Reports:—

"But the superintendent of an insane asylum has other people to manage and to govern besides his patients. Numerous servants and attendants, under whose charge the insane are placed, demand his vigilant, keen, and incessant supervision. The amount of mischief which even one scoundrel is capable of working in any large establishment, and the annoyance and perplexity such a character can contrive to give, can be understood only by those who have encountered the evil. The Toronto Asylum has not enjoyed total exemption from troubles of this sort. I have, however, fearlessly and without favour exercised, as I purpose for the future to exercise, towards all under my control, that authority which the law has vested in me as Medical Superintendent of this Asylum, and without which all salutary discipline would be but a delusion. No man of sense in a position of heavy responsibility will dismiss a good servant; none but fool or a knave will retain a bad one. No evil which can redound from the dismissal of a bad servant in a public institution, no slander which he may whisper or publish, can possibly be so dangerous as his retention. Such persons seldom fail to paint in dark colours the character of their late masters; and there is always to be met with in society a considerable number of people who feel a deep interest in their neighbours' faults, and find much comfort in making them largely known. An officer of this institution, not overloaded with other work, has been in the habit of inquiring from servants leaving the establishment what have been the reasons for their departure? It would be very interesting and instructive to have a perusal of this gentleman's notes."

19. It has been our pleasant duty, on more than one former occasion, to pass in review the pages of the *Psychological Journal*, which, under the able management of its distinguished editor, Dr. Forbes Winslow, has won for itself no mean place in the scientific journalism of the day. We have now before us four of its quarterly issues, and while we find therein much to commend, and which is calculated to maintain its high po-

sition, we must, in critical candour, add, that some portion of their contents appears to us by no means "up to the mark" of former excellence, nor even calculated to promote the interests of that department of scientific knowledge with which the *Psychological Journal* has been so long identified.

The January Number opens with a paper, "*Body v. Mind*," which is every way worthy of the periodical, and of the important subject handled. If we err not, after a careful perusal of its contents, we would ascribe it to the accomplished pen of the editor himself. But, whoever is its author, it contains a valuable contribution to a subject until of late quite too much neglected, namely, the relative importance and mutual bearing of matter on mind, considered with a special reference to the human organization. The writer pleads, and pleads well, for due attention to *both* these constituents of our nature, and sums up a long and interesting investigation into the causes and consequences of neglected physical health, in *resumé* of his facts and arguments, which we cannot refrain from quoting somewhat at length:—

"There are certain practical deductions obviously to be drawn from the details and arguments that have been brought forward.

"1. Devotion to intellectual pursuits and to studies, even of the most severe and unremitting character, is not incompatible with extreme longevity, terminated by a serene and unclouded sunset. When Fontenelle's brilliant career terminated, and he was asked if he felt pain, he replied, 'I only feel a difficulty of existing.'

"2. Mental application is a powerful remedy in diseases both of body and mind; and its power as a remedy is proportionate to its intensity as a pursuit.

"3. The emotions, especially those of a depressing kind, as anxiety, fear, &c., have a remarkable influence in giving a tone to, and intensifying the morbid effects of, excessive mental labour. Yet in some cases, as in those of Byron and Cowper, the best and only resource against despair is found in composition.

"4. The turmoils of active life do not appear to render intellectual labour more injurious to the system; possibly here also the influence may be counteracting. Milton, the Secretary to the Commonwealth, in times when men lived years in months—blind and in domestic discomfort, writing his immortal poems; John Wesley, persecuted and almost an outcast from his former friends—in 'labours more abundant'—denying himself natural rest and refreshment, yet acting with mind and body with unparalleled energy; Voltaire, the apostle of infidelity, at war with more than the whole world; Luther, hunted by principalities and powers like a wild beast—these and a cloud of others warred with the existing order of things, and remained masters of themselves and their mental powers to a ripe old age.

"5. The injurious effects of mental labour are in great measure owing—

"To excessive forcing in early youth;

"To sudden or misdirected study;

"To the co-operation of depressing emotions or passions;

"To the neglect of the ordinary rules of hygiene;

"To the neglect of the hints of the body; or

"To the presence of the seeds of disease, degeneration, and decay in the system.

"6. The man of healthy phlegmatic or choleric temperament is less likely to be injured by application than one of the sanguine or melancholic type; yet these latter, with allowance for the original constitution, may be capable of vast efforts.

"7. The extended and deep culture of the mind exerts a directly conservative influence upon the body.

"Fellow-labourer! one word to you before we conclude. Fear not to do manfully the work for which your gifts qualify you; but do it as one who must give an account both of soul and body. Work, and work hard, whilst it is day; but the night cometh soon enough—do not hasten it. Use your faculties, use them to the utmost, but do not abuse them—make not the mortal do the work of the immortal. The body has its claims,—it is a good servant; treat it well, and it will do your work; it knows its own business; do not attempt to teach or to force it; attend to its wants and requirements, listen kindly and patiently to its hints, occasionally forestall its necessities by a little indulgence, and your consideration will be repaid with interest. But task it, and pine it, and suffocate it, make it a slave instead of a servant; it may not complain much, but, like the weary camel in the desert, it will lay it down and die."

We have, in the same Number, some interesting details and statistics respecting the treatment of the insane on the Continent of Europe, and especially in the asylums of Italy, Germany, and France. These will be read with interest, and we think also with profit, by many in this country engaged in the same arduous and honourable field of medical practice. Some of the habits, in the treatment of Continental patients, might, we think, be transferred with profit to our own asylums.

These, and other articles in the January Number of the Journal, are both in keeping with its subject matter, and creditably compiled and composed. But we must be permitted to express our doubts as to the admissibility into the pages of the Psychological Journal, on the score of suitability, of such a paper as that which here meets us, headed "The Indian Rebellion in its Moral and Psychological Aspects." That rebellion may, undoubtedly, have such aspects, but if it have, we altogether miss them here. This Essay might form a very proper article, or rather some half-dozen such, in the way of leader in

the "Times," or a chapter in some historical essay on the Indian revolt, but we must demur to its appearance in the Journal before us; the more especially as the latter half of its title and implied promise are almost entirely forgotten or omitted.

Nearly the same observations apply to the rather elaborate article on "Civilization," with which the April Number opens. We cannot but look upon such papers as these as very much like "filling stuff," and would prefer to see the pages of this hitherto admirable periodical more strictly confined to what is its legitimate *materiel*. The article on the "Psychology of Kant," with which the July number concludes, is an able digest, carefully and philosophically written, of the mental science of the great German metaphysician of the last century. And yet we must honestly say, that its place would appear to us more germane to the pages of the Transactions of some of our Universities or Philosophical Societies, than where it is now found. This paper is, however, both more appropriate, and vastly more in the true spirit of a Psychological Journal, than those which we have noticed, and others which might have been specified.

We perceive that *intemperance*, both as a predisposing cause, and in many cases as a form of *bond fide* insanity, comes in for a due share of attention in these Numbers of the Journal before us. But, while so saying, we must also add, that such a production as No. VI., in the January Part, seems to us very far indeed below the standard, either in matter or style, of a scientific periodical. It might pass muster among a bundle of "temperance tracts;" but how it came, in its present form, from under the editorial censorship of Dr. F. Winslow, is really more than we can, "as at present advised," say. We have here an *amalgam* of most thorough truisms, some (as to us appears) very irrelevant, and, as it would seem, random selected cases, with an attempt at pathological and psychological comment, conveyed in language not always scientifically, not to say grammatically, correct. As a fair specimen of the writer's style and manner of handling his subject, we extract the closing paragraph of his Essay, and shall add no comment:—

"Among the immediate advantages which would result, might be calculated a great diminution of crime; and amongst the working classes they would, with habits of sobriety, manifest greater prudence and forethought; and thus, with a sense of self-respect, would be found a great decrease of pauperism and its consequent degradation. And those amongst the wealthy, when they are cured of an insatiable habit, they would be more likely to attend to works of utility, and may thus become benefactors of their less fortunate fellow-subjects, instead of perverting their morals by their previous most debasing

example. Thus we may affirm, that the good which would result from forcibly counteracting the inordinate craving tendency of chronic intemperance would be greater than the most sanguine spirits, in the full activity of their benevolence, could ever have anticipated.

“And, therefore, as it is our firm conviction that mere precepts, however good, will not correct the errors and crimes resulting from drunkenness, then, in the name of religion, morality, patriotism, and humanity, there is demanded some forcible and effective means to render certain this essential and all-important reform in the habits of a vast proportion of the community.”

Somewhat similar in style to the foregoing is an “Autobiographical Sketch of a Drunkard,” forming No. V. of the Journal for July. We cannot but consider it a most unfortunate circumstance, for the credit of our contemporary, that such a paper has found its way into it. How *could* the respected editor have admitted it? Has he ever read it? The *moral* of the tract (for it is another attempt at a “temperance tract”) is exceedingly questionable. It is the experience of an unhappy man, who, struggling against strong conscientious convictions, and as we think exceedingly ill-advised, took the total abstinence pledge again and again, only to break it. He was evidently in a sober and serious mood when he wrote this autobiographical sketch, but how long he was likely so to continue, or whether he even now remains in it, are matters of exceedingly difficult solution from the data which his own recorded experience affords. But our principal objection to the appearance of such an article in the pages of the Psychological Journal is founded on the fact of its containing sentiments which go very far indeed to upset, or at least to unsettle, in weak-minded persons, some principles and practices which lie very near the foundation of our common faith. How could the editor possibly give admission into his Journal of this teetotaler’s hallucinations on the subject of the Christian Sacrament of the Lord’s Supper, without one word of caution or refutation? We must earnestly advise a far more careful execution of the editor’s office of revision at least, if not of exclusion, in the future management of this hitherto excellent Journal.

Our notice has already extended so far, that we have only space left to mention, with deserved commendation, the excellent Review of Dr. E. B. Legúard’s “Researches on the Pathology and Physiology of the Nervous System,” with which the July Number opens; the paper “On the Causes of Idiocy,”

which follows ; and those on the criminal responsibility of the insane (No. X. in the Number for January, and No. II. in that for April). Those papers are all well worthy of an attentive perusal, and quite in keeping with the high character which the periodical has hitherto maintained.

The October Number of the Journal, which completes the eleventh volume, has just issued from the press ; and although several of the articles furnished herein to the students in mental science, as well as those generally interested in kindred subjects, deserve a special notice, our limits prescribe to us but a slight and passing one. The *contents* of the present Number will show the line pursued by its accomplished editor ; and in thus making a reference to Dr. Forbes Winslow, we cannot forbear the addition of a wish, that his mind and pen were more palpably manifest in this Journal generally, as well as in the portion of it now before us. Dr. Winslow has furnished one article at least, under the head of "Lunacy Legislation," forming the valedictory address delivered by him at the meeting of Medical Officers of Asylums for the Insane, held at Edinburgh in the month of July last. In this very valuable document, various existing evils, connected with the subject of insanity and *quasi* insanity, are pointed out, as well as some greatly called for, and very seasonable remedies, chiefly of a legal kind, suggested. We hope that this paper may come under the notice of some of our legislators, and especially those of them in that position, which calls upon and enables them to originate measures for many of the evils which so seriously affected society, arising from this acknowledged source.

We have also an interesting paper "On the Moral Pathology of London," but, respecting it, as well as the opening "Psychological Quarterly Retrospect," we confess to the opinion which we have been constrained to express regarding other such contributions to former Numbers of this periodical, that, instructive and suggestive as they may be, we can hardly endorse them as directly or sufficiently within the legitimate scope of the Journal wherein they appear. If it be destined to fill the important path in a medical and psychological sense which it has chosen for itself, its articles must bear more directly, and with a more strictly scientific aim, on the subject matter in hand.

There is a clever, as well as an amusing paper "On a Particular Class of Dreams induced by Food," and another "On the Psychological Basis of the Language of Orators, Poets, and Philosophers," which will repay a reading : in the latter we

notice that higher tone of psychological writing and thought, which (to borrow a phrase from our neighbours north of the Tweed) we *desiderate* in such a Journal.

The statistical information furnished in the remaining articles, which deal mainly with the Asylums on the Continent, as well as the present state of Lunacy in England and Wales, is exceedingly valuable, as we have no doubt it is authentic, and will be read with interest by all who are engaged in this most honourable and praiseworthy department of practical pathology.

20. The Asylum Journal of Mental Science, or, as in its last issue for the October quarter, it is more appropriately designated, "The Journal" simply "of Mental Science," an alteration suggested and agreed upon at the recent Annual Meeting of the Association of Medical Officers of Hospitals for the Insane, contains, in its several parts for the present year, much valuable matter in relation to Psychology in all its departments. The papers in the January Number are numerous and interesting, in addition to several good illustrations. One of the former is an extended and able review, by Dr. Bucknill, the Editor of the Journal, of the last Report of the Inspectors of Hospitals for the Insane in this country, which is characterized by the reviewer as "a full and most valuable Report, replete with useful and exact information, and with scientific interest," an approval of no mean kind, coming, as it does, from a hand well skilled in discerning good and evil in such production. The smallness of the salaries paid to the Inspectors is exposed for its invidiousness and great unfairness as compared with those paid to both the English and Scotch Commissioners, who have not nearly so much actual work to do, or responsibility imposed upon them. "They," observes the writer, "at present receive only £900 per annum, a sum by no means adequate to their position and the work they have to do, and invidiously small as compared with the salaries of Commissioners in other parts of the kingdom." We have expressed pretty similar views ourselves in our last Annual Review^a on this point, and are now very glad to find that we are supported by our excellent and disinterested contemporary, and, with him, seriously hope that our Inspectors "may receive, under any future enactments, a more just remuneration than that now appointed them." Another excellent and well-timed article in this Number is one entitled "Admission of Reporters to the Board Meetings of Asy-

^a See vol. xxiv., No. 48, p. 348.

lums," which has more especial reference to the Cork Asylum, and incidentally to that at Mullingar, in which institutions the extraordinary, unprecedent (except in the above-named two Asylums), and unfeeling practice has been established, of regularly parading in the local newspapers the sayings and doings of certain empty-headed and vain Governors, panting after newspaper notoriety, even through the unfortunate insane under their protection. The writer of this paper, after going pretty largely into the matters of a newspaper report of the trumpery proceedings of a Board Meeting of the Cork Asylum, and after a good deal of cutting sarcasm, goes on to say:—

"Certainly there is something bad pervading the establishment; namely, the influence of vain egotistical men as governors, whose proceedings appear but too well adapted to promote a general insubordination. By transforming their Board into a petty police court, they will doubtless succeed in driving from the Asylum all good servants. By denying to their superintendent all proper authority over such servants as he can procure, they will get plenty of complaints to investigate; and by publishing such investigations in the newspapers, they will find themselves at length served by such persons only as are indifferent to the public exposure of any venial lapse of temper or conduct. Was it not enough to dismiss the insubordinate Mrs. Larkin for her act of disobedience? Was it not enough to fine and reprimand the impertinent Julia? but they must also be gibbeted to the whole country side, as examples of board-room justice. The officers and attendants at the Cork Asylum must be very thick-skinned. We trust that the patients possess the like quality, for the natural course of events will cause them to need it. After these complaints were disposed of, the jocose Mr. Dowden became quite eloquent on 'a complaint he had to make, they had no schoolmaster there,' &c.; 'they could get one for £20 a year;' 'there is no doubt we pay a wretched price for mind.' Alas, yes! one of the prizes we pay is to have places of business converted into oratorical platforms, and our time wasted in listening to *bunkum* speeches. Bunkum is the American term for those speeches in Congress which are *solely* intended for the *local* newspapers, and the gratification of the friends and constituents of the orator. Bunkum occupies a vast space of time at St. Stephen's, to the great hindrance of business; but if it invades successfully the board-room of asylums, gaols, unions, and other places, which ought to be centres of action alone, it will exalt throughout the country the unpractical wind-bag man, above the man of affairs, and prove about the worst thing that ever came from the west."

We have only further to remark on this subject, of admitting reporters into asylums, that we consider it to be the bounden duty of the Inspectors to call the attention of the Executive to

such an impropriety, in order to have the evil at once remedied.

The April Number has the following, amongst other papers—"Description of the new House at the Devon County Asylum, with remarks upon the sea-side residence for the insane," by the Editor; "The Practice of Surgery in connexion with the Treatment of Lunacy," by Mr. Tyerman, one of the Medical Superintendents of the Colney Hatch Asylum, a very practical and instructive communication; "On Mental Physiology, by Mr. Dunn, F.R.C.S. Eng.;" "The Insane Colony at Gheel," by Dr. Stevens, Physician-Superintendent of St. Luke's Hospital—a paper full of interest; "The Condition of the Insane, and the Treatment of Nervous Diseases in Turkey," by Dr. Foote, formerly the able Medical Superintendent of the notorious Norfolk County Asylum, where he was so tyrannically treated by its Visiting Justices;—this essay does him much credit; "The Custody of the Insane Poor," by the Editor, who has described this subject with much ability, but we must take exception to the term "custody," which sounds harsh and savours too much of the gaol. We find in the July Part of the Journal, several excellent and valuable articles, with full reports of the Commission of Lunacy on Sir Henry Meux, and the Rev. Mr. Leach, both of which have engaged so large a share of the public attention. Mr. Tyerman's paper is continued in this Number with equal interest as the first portion; and Dr. Huxley, the eminent Physician-Superintendent of the Kent County Asylum, has a notice of a form of window suited for asylums, which appears ingenious and well contrived for its special purpose. The last Number of the series for the year, the October issue, which has just come to hand as we were going to press, has for its opening paper one entitled, "Hamlet, a Psychological Study," from the prolific pen of the talented Editor, who discourses his subject with much eloquence, and at great length, namely, in 55 pages; next follows the official Report of the proceedings which took place at the recently held annual meeting of the Association of Medical Officers of Asylums and Hospitals for the Insane, in the University of Edinburgh, Dr. Conolly, D.C.L., filling the chair as President for the current year; Dr. Winslow, the retiring President, read a valedictory address, of much eloquence of style, as might be expected from him. Several papers of interest and importance, now published *in extenso* in the Journal, were read at the Meeting, and among them was one in particular supplied by Dr. Huxley, the very intelligent and generally esteemed Resident Physician of the Kent County Asy-

lum, "On the Existing Relation between the Lunacy Commission and Medical Superintendents of Public Asylums," in which he expresses his mind most independently and freely in regard to the conduct of the Commissioners in Lunacy towards the experienced and able men who are at the head of the public asylums in England; and from the tenor of which the only conclusion to be drawn is that, as matters at present exist between the Commissioners and the Superintendents, nothing short of a drawn battle is close at hand, nay, at the very doors,—a state of things greatly to be lamented, being much against the public interests, and very different to what happily exists, and has ever existed between the Government Inspectors in Ireland and the Medical Officers of the Public and Private Institutions for the Insane; courtesy upon the one hand, and esteem and respect on the other, being the order of the day with them in their different relations. That there are good grounds for the conclusion we have arrived at, the annexed extracts from Dr. Huxley's paper will make clearly manifest:—

"Let me review briefly a recent act of the Commission bearing on the moral and social relation between Superintendents and Commissioners. In the inquiry the Commissioners instituted by circular respecting the use of the shower-bath in asylums, an accident merely coinciding with the application of that apparatus set that inquiry in motion. If the apprehension was right, and demanded, on discovery, the extreme measure the Commissioners sought to institute, where was their knowledge of the practice of shower-bathing in asylums during many previous years? With what a sudden fire for the public weal were they not burned by the accident of a man whose heart was degenerated in structure being submitted to the shower-bath, and dying soon after! I have said, *the accident of a man with a degenerated heart*, which appears to have been the real accident, and a contingency, perhaps, not to have been foreseen; but I must not be understood as advocating the practice of shower-bathing of this sort. Nevertheless, the Commissioners put an engine of severe punishment in motion, before obtaining an accurate knowledge of the circumstances post mortem. Thus they are a semi-medical body in constitution, whilst employing no deliberative process by which their title to that distinction would be established. The whole proceeding strongly displays the real regard of Commissioners for Superintendents, whom they seem not unwilling to victimize in marching after popularity. Circumstances of this painful kind not only display a deplorable absence of the right relation between the two bodies, but, together with the other medical matters of collision, also show that the Commission is pretending to preside over our affairs, without the necessary qualification and without liberality. That is a course not to be persisted in without public inquiry. . . .

“ Whilst, then, the Commission retains its present mixed character, unanimity of opinion and uniformity of action amongst Superintendents can alone save the degradation of asylums and the personal derogation of their chief officers, both of which may be foretold as sure results, in due season, of the present theory and practice of the Commission. It is a question for the Association whether it is not now called upon prudently to influence its members who are Superintendents, inducing them to moderate that too ready spirit of conciliation and encouragement—that disposition to repose faith and give honour, before the proof has been obtained that honour and confidence are due. Many circumstances have arisen of late years which ought to incline Superintendents officially to regard Lunacy Commissioners with a feeling approaching to suspicion.”

We are glad to observe from the proceedings of this increasingly large and influential association, that its next annual meeting, on the motion of Dr. Stewart, the Honorary Secretary for Ireland, is to be held in Dublin, for the first time since its establishment, upwards of ten years ago. The President elect for 1859, we perceive, is Sir Charles Hastings, of Worcester—a gentleman who, however eminent and well known as a respected and leading member of our common profession in England, is unknown as a psychologist, and we are free to confess that in a specialty, like the Association in question, we consider that unless the list of highly qualified men were totally exhausted—which we cannot believe that it is or can be—the honourable position of President should not be conferred upon those who are of no weight or authority, whether by their matured experience, writings, or otherwise, in the insanity department of the profession. We make these observations without meaning the slightest disrespect to Sir Charles Hastings, but simply on principle, and for duly upholding the proper status, influence, and independence of an invaluable Association, provided that it can be kept clear of cliqueism, and not made a tool of in anywise to raise the vanity or promote the selfish interests of any man or set of men. We have neither time nor space to particularize the other interesting portions of this Number of the Journal, except its concluding editorial article, headed, “ The Newspaper Attack on Private Lunatic Asylums,” which is written with considerable spirit, point, and ability, against the newspaper press writers for their reckless onslaught and “ hounding on the dogs of war,” from the “ Thunderer” down to the meanest “ rag,” upon a whole class, because one of their order grossly abused, or rather, in an evil hour, permitted himself to abuse his trust: a line of procedure which, to say the least of it, was unfair and un-English in the extreme, and most derogatory to the so-called “ Fourth

Estate," for which we have the highest respect, and whose enormous power for good or for evil cannot be denied. But on this very account that estate should be careful not to ignore justice altogether, in a mistaken and rabid desire to serve the public. And here we feel it only a matter of duty to observe that, excepting this most unjustifiable conduct of Mr. Metcalfe, and his utter forgetfulness of what he owed to "the weaker vessel," to his profession, and to himself, his antecedents were all in his favour—nay more, highly to his credit, and his conduct as the proprietor of a private asylum such as to win for him the affection and esteem of his patients generally, for his always humane, considerate, and irreproachable bearing towards them. No doubt he met with the veriest Tartar in the person of the female patient who escaped from his care, and in endeavouring to recapture whom he placed himself in so unbecoming and so false a position. Under such circumstances, therefore, some sympathy is due to Mr. Metcalfe, and most undoubtedly justice should be mingled with mercy towards him, as we hope ultimately it will. There is a sentence in this "newspaper attack" article, a portion of which we cannot pass by unnoticed. The writer says:—"In referring to any defect in the Lunacy Statutes, although it may exist but in theory, it is but just to that great and good man who *reformed the treatment of the insane in Ireland*," &c. We have italicised the portion we must join issue upon with the able editor who penned it. "The great and good man" referred to we presume to be Lord St. Leonards, so well known in Ireland as Sir Edward Sugden. What his special greatness and goodness were, we shall not now stop to inquire; but we demur altogether to the statement made, that he reformed the treatment of the insane in Ireland. The treatment of that class, in both public and private asylums in this country, was unexceptionable, enlightened, and humane, time out of mind, so to speak, before Sir Edward Sugden set a foot upon Irish ground, or his dreaded name was lisped in the halls of our law-courts. Sir Edward Sugden "reformed the treatment of the insane in Ireland" in this way, namely, he was the instrument with the Government of the day in having imposed upon our public asylums a code of "general rules, made, framed, and established by the Lord Lieutenant and Council of Ireland, March 27, 1843," which in its chief points was impracticable; and from that time to the present has been felt as a most grievous incubus, and the cause of much heart-burning and discord here and there in the district asylums. One of the rules in this code was—that, too, upon which the entire good management of the institution hinged—

that an *extern* official, in the person of a visiting physician, to attend thrice a week (except in such asylums in which the number of patients exceeded 250), should direct the course of moral and medical treatment of the patients, their amusement and employment! Now could anything have been more preposterous than this? Well, so preposterous was it found, that the rule became a dead letter in practice, and a new order of things took its place, that of putting the power into the hands of a resident, instead of a non-resident or visiting physician. Again, "this great and good man,"—as our contemporary chooses to style him, in the plenitude of his editorial good-nature and gratitude, not in the spirit of toadyism, we feel assured,—by a stroke of his then all powerful Lord Chancellor's pen, deprived the officials of the benefit of obtaining retiring allowances by scoring out a clause in a Bill which afterwards became an Act, providing for the same on a liberal scale; and not until the expiry of more than twelve years afterwards was this boon (on a very miserable scale, however), squeezed from Parliament for so deserving and hardly pressed a class of officials. Such were some of the *good* deeds of this "great man" in connexion with the "reforming of the treatment of the insane in Ireland," and, having thus plainly stated them, there we shall leave the matter.

21. The only Number of the "American Journal of Insanity" which we have received since our last Review, is that for April of the present year. It opens with an able paper on "Moral Insanity" which is well worthy of perusal; and the following conclusions at which the writer arrives on this peculiar species of perversion of the moral faculties appear sensible and just:—

"The general tendency of the doctrine of moral insanity is bad, whatever show or real feeling of humanity there may be in it. It is bad in a religious view, because it tempts men to indulge their strongest passions, under the false impression that God has so constituted them that their passions or impulses are not generally governable by their will or their reason, and that, therefore, there is no punishable guilt in indulging them. This is fatalism. It is bad in a legal view, because it protects from due punishment offences which, with the self-denial and self-control that men rightly trained and rightly disposed are quite capable of exercising, might be avoided. It tends to give to bad education, loose habits, vicious indulgence, neglected parental control, and disobedience to God, an immunity from the prescribed penalties of crime, that is not warranted by the Scriptures, the law of reason, or any codes of human law that assume to be founded on the law of reason or the law of God. We cannot, therefore, concur in recognising as physical disease, without clear

absolute proof of its being such, after a most thorough examination by the most thorough experts, any distinctive form of insanity that is so liable to disorganize and nullify the code of criminal law as moral insanity is. It is elastic enough, if well stretched, to cover every possible shade and degree of criminality, that has not a transparent guilty nature. It has already been made a cloak for homicide, arson, theft, lying, and drunkenness, under characteristic though somewhat barbarous terms. It has almost protected the most conventional of all crimes, forgery; and probably would have done so if the dead languages could have supplied a proper-sounding phrase to describe such a novel form of mania, and that would delude courts and juries into a belief that such a phrase implied some scientific or psychological discovery to take the guilt out of sin, and convert crime into innocence; which, we conclude, is the ultimate result of the doctrine of moral insanity."

There are several other papers, &c., in the Number before us, of this well-conducted Journal, which, however, we are unable in this Review, already so greatly extended, to take any special notice of. We wish that, for the future, means would be taken to supply it regularly as it comes out, and not only now and again, as has been the case latterly.

22. During the year which ended on the 31st March, 1858, the patients treated in the Belfast District Hospital for the Insane are thus stated and accounted for in the twenty-eighth Annual Report of that Institution:—

	M.	F.	T.	M.	F.	T.
In House on 1st April, 1857,	188	142	330			
Admitted since, New Cases, 65	65	68	133			
Relapses, 6	6	8	14			
	—	—	—	71	76	147
Total under treatment during the year,	259	218	477			
Discharged, recovered,	38	44	82			
Do. relieved,	14	12	26			
Died,	14	11	25			
	—	—	—	66	67	133

Remaining under treatment on 31st March, 1858, 193 151 344

The total Admissions during the year were 5 more than in 1857.
The daily average number of patients during the year was 342.59.

Notwithstanding the large additions made to the Institution a few years back, it, like so many other similar establishments, has had greater demands on it than it had the means of

accomplishing during the past year, as the annexed extract intimates:—

“The House, throughout the year, has been not only full, but overcrowded, as will be seen by the average daily number, exceeding 340; whereas, properly, there should not have been more than 330, and not even this latter amount treated without a strain on the capabilities of the establishment; but, owing to extreme urgency occurring in individual cases, together with endeavouring to avoid delay in the admissions in general, which seldom happened, the numbers have gradually increased, as stated, thus making a pressure in the house extremely irksome, and embarrassing in many respects. Establishments for the treatment of the insane should not, according to the repeatedly and unanimously expressed views of the best and most experienced authorities, exceed 250 (under the one roof), that number being considered the largest which can be treated efficiently, and have fair justice done to all parties—inmates and officers.

“At the present time the cases on the books for admission, as vacancies may arise, are 9.

“Fully two-thirds of the patients in the house are of the so-called incurable class—a class, however, requiring, for the most part, as much constant care and supervision as any other. And it is only proper to observe, and a point, too, strongly to be dwelt upon and maturely weighed, that, though this term ‘incurable’ holds good so far as regards its subjects being never again fitted to take their places in the busy world, yet the greater proportion of them is comparatively sane (and, to the casual observer, would appear entirely so), whilst under regular and systematic treatment and supervision, and capable of both enjoying and appreciating the means using for their care and benefit. This, in itself, is a great amelioration of so dreadful an infliction as insanity; and the thinking and humane portion of the community will see from this, that, though every Hospital for the Insane is populated as thus indicated, yet they are still fulfilling their important purposes very decidedly and beneficially, and, as regards society at large, doing not a little for the protection both of life and property, by having such cases secluded from extern excitement.”

The social condition of the patients admitted during the year, is given as follows, and from which it will be seen that more than two-thirds were of the “single” class, thus favouring the belief that “single blessedness” is inimical to mental health:—

Social Condition of the 147 Cases admitted during the year.

	M.	F.	T.
Married,	19	19	38
Single,	50	48	98
Widowers and Widows,	2	9	11
	—	—	—
Totals,	71	76	147

Two other interesting Tables are the annexed in regard to the ages of the patients discharged recovered, and the time they were under treatment, the largest number cured being from 30 to 40 years of age, and as to time, from three to six months, gradually decreasing afterwards, in the latter respect the longer continuance of the disease adding to its intractability:—

Ages of the 82 Patients discharged Recovered during the year.

	M.	F.	T.
Under 20 years,	2	4	6
From 20 to 30 years,	9	7	16
„ 30 to 40 „	8	9	17
„ 40 to 50 „	7	8	15
„ 50 to 60 „	9	7	16
„ 60 to 70 „	3	9	12
Totals,	38	44	82

Period of time the 82 Patients discharged Recovered were under treatment.

	M.	F.	T.
Under 3 Months,	8	5	13
From 3 to 6 Months,	14	17	31
„ 6 to 12 „	7	9	16
„ 1 to 2 years,	7	5	12
„ 2 to 5 „	2	7	9
„ 5 to 10 „	0	1	1
Totals,	38	44	82

The deaths which occurred during the year were in much smaller proportion than usual. On this head Dr. Stewart observes:—

“The death cases during the year, it will be seen on referring to the obituary table, were but 25 (14 males, and 11 females), being considerably less than last year's, when the number was 38. It may be observed, too, that there was a larger number under treatment, both in the aggregate and the daily average, throughout the past year, than the preceding one,—the former being 477, compared with 459 in 1857; and the latter 342, compared with 323; thus making the difference in this respect still more in favour of the past year, when the per-centage of deaths, calculated on the average daily number under treatment (which is the fairer method of taking it, and not on the total number), was under 8 per cent., an unusually low average in these institutions, which may be set down at between 10 and 11 per cent., and still not considered great. It is also to be remarked, that three of the deaths did not come under the ordinary category—one, for instance, was but six hours in the house when death suddenly occurred, from heart disease, of which the deceased

had been the subject for some time previously. In the second case a fatal issue was inevitable, the patient having been received from gaol in a completely prostrated state from the effects of a severe wound he had inflicted on himself with a suicidal intent; and, in the third, one of the females terminated her existence by suspending herself, by means of a bed-sheet, in a very ingenious and effective manner, from the window in her bed-room, between night and morning, on which a coroner's inquest was duly held by J. K. Jackson, Esq., when a verdict, in accordance with the above facts, was unanimously arrived at, and the immediate attendant in charge, and the establishment, exonerated from all blame in so unfortunate a catastrophe, but one which no human foresight could by any possibility have prevented. Indeed, it may be stated, on this head, that, considering the large number, always, of cases in every asylum, with a suicidal propensity strongly marked in them, and who are unceasingly on the watch to accomplish their purpose—and this, too, in the most unlooked-for and unsuspected methods—the surprise is, that so few are enabled to carry out the one object upon which their remaining faculties are entirely concentrated. The other causes of death were, viz.:—General debility, 8 (4 males, and 4 females); maniacal exhaustion, 5 (2 males, and 3 females); pulmonary consumption, 3 (1 male, and 2 females); apoplexy, 2 (both males); heart disease, epilepsy, paralysis, and scrofulous disease, each one (all males). The oldest male in the mortality list of the year was 73, and the youngest 19. The oldest female 65, and youngest 18. It should be observed, before dismissing this head of the Report, that the last year saw the conclusion of the mortal career of the first inmate received into the house, on its opening in 1829. This was a female, whose incumbency extended to the long period of twenty-eight years and upwards, and in whose history one or two matters worthy of notice here may be glanced at. During the progress of the building of the Asylum, this patient was known to have come to see it, and to have marked out a particular room for herself, she having a presentiment of approaching insanity, and one which proved to be too true. Having been under treatment some months, she had become, to all appearances, perfectly convalescent, and fitted for removal; but the very day on which her husband came to take her home she relapsed, and from that period to her dissolution there was never any further mental restoration,—severe and frequent attacks of high maniacal excitement periodically occurring all the remaining portion of her lengthened inmateship. During her abode in the house both her son and daughter were likewise patients. The former made a good recovery some years ago, the latter died under treatment, many years prior to her mother's decease, who, in neither instance, would admit that they were her children; but who, nevertheless, and more especially in the case of her daughter, manifested, in various ways, that a mother's love and feelings, however obtuse and dormant they might have become from the effects of long-continued mental disease, were still by no means obliterated."

The vexed question of restraint is thus shortly alluded to, and in a manner that none but the most fastidious and ultra humane could take exception to, and upon such it would only be the height of folly to waste words:—

“The cases requiring mechanical restraint during the past year were very few, as usual, it being the exception to the rule, the most perfect freedom not being enjoyed by all the inmates; and this not as a novelty during the past year only, but every year since the institution came into operation. Nor would this point of detail be now referred to at all, only that it appears called for, to place on record, that cases will arise from time to time, which not to restrain in their maniacal fury by the application of a strait jacket, or otherwise, would be nothing short of madness on the part of those charged with their treatment and the safety of the patient, as well as that of the attendants.”

The fact of Ireland having taken the lead, and being beforehand so many years—now upwards of thirteen—with the sister country, in having the great and important advantages of an entirely distinct institution for “criminal lunatics”—those guilty of offences of more or less gravity, and acquitted of the penal consequences of the same on the ground of insanity—is mainly, if not altogether, attributable to the persevering efforts of the authorities of the Belfast District Hospital for the Insane, who thus succeeded in establishing a principle which is only now being recognised in England, and which never would have been, is quite manifest from the difficulties so long placed in the way of the Commissioners in Lunacy there, but for the great fact staring the authorities in the face of the existence of that principle in Ireland, who thus had to yield ultimately, and with no very good grace either, as we have already observed in the course of this Review, in giving one to England also. On this subject the Belfast Report has a paragraph which we annex, and with reference to which—should it so occur that fine-drawn distinctions will be attempted in order to evade the spirit and letter of the law, as seems to be apprehended by imposing criminal lunatics, whether stamped with major or minor offences, we take for granted that such will be firmly resisted, and no such contaminating element again permitted to find an entrance into our district hospitals for the insane. The Legislature has settled that point; let, then, others, whose bounden duty it will be, and especially the Inspectors, look narrowly to it, by not permitting or sanctioning the rights of the ordinary insane patient to be infringed upon in the slightest degree in this respect. The subject is a most important one to the character and best interests of our public asylums throughout the country, and should

be rigidly watched, as we shall feel it our duty to do now, as formerly, when we called special attention to what, at the time, appeared to us a very suspicious looking proposition in the Inspectors' Parliamentary Report, in reference to relieving the Central Asylum at Dundrum of its superfluous criminal inmates^a.

“ In last year's Report it was stated that the establishment had then, happily, become entirely free from inmates of the ‘ criminal lunatic’ class, which was so great a desideratum, and one for the accomplishment of which the Governors of this Institution were the first to bring before the proper authorities, and to continue doing so, year after year, until, ultimately, an Act was passed for the establishment of a Central Asylum at Dundrum, for the removal to, and future charge of, all cases acquitted of criminal offences on the ground of insanity. This freedom from such exceptional inmates will, it is to be hoped, be continued intact; and that no relaxing of the law will be had recourse to, to reconvert these institutions into gaols, for the ‘ custody of lunatic prisoners’ of any description. The Act of Parliament above referred to is very explicit on this head, it distinctly enacting, ‘ that whenever, and so soon, as the said Central Asylum shall be erected, and fit for the reception of criminal lunatics, it shall be lawful for the Lord Lieutenant to order and direct that all criminal lunatics then in custody in any lunatic asylum or gaol, or who shall thereafter be in custody, shall be removed, without delay, to such Central Asylum, and shall be kept therein so long as such criminal lunatics, respectively, shall be detained in custody’ (section 8); and that ‘ the interpretation of criminal lunatic in the Act shall be construed to mean any person acquitted on the ground of insanity’ (section 26).”

The Report mentions a “ public court” having been held at the Belfast Asylum, by the Commission of Inquiry on Lunatic Asylums in Ireland, to the objects and constitution of which Commission we referred in our Review last year^b. Two years and upwards have now elapsed since that Commission was issued, and yet to the present time no Report of their labours, over which they have been so long incubating, has yet seen the light of day^c. The following is the reference Dr. Stewart has made to the above Commission :—

^a See vol. xvi., No. 32, November, 1853, page 368.

^b Vol. xxiv., No. 48, page 378.

^c This Report has been issued as these sheets were passing through the press, and, in company with it, a reply by Dr. Nugent, the senior of our Irish Inspectors of Asylums; who has found it necessary to at once openly refute many of the statements contained in it. So important is the subject, that we shall notice both Report and Reply in our next Number.

“In May last the Commissioners of Inquiry on the Lunatic Asylums of this country held a public court here, in regard to the general management of the Institution, which was attended by a large number of the Board of Governors, and some others. The inquiry was conducted by examination on oath, and lasted an entire day. To the present time no Report has been made by the Commissioners, so that nothing is known of the changes which may be recommended by them in the existing state of the Asylums. Some additional returns have been called for by the Commisioners, and duly supplied to them.”

The financial portion of the Report affords the following particulars of the expenditure incurred during the year, with which we close our remarks on this long-established provincial hospital for the insane:—

	£	s.	d.
Paid for provisions,	2861	14	2
Do. Clothing,	634	1	3
Do. Bedding,	167	19	10
Do. Furniture,	54	13	8
Do. Fuel and light,	320	11	10
Do. Soap, candles, &c.	115	13	4
Do. Stationery and printing,	40	16	10
Do. Advertising,	3	3	6
Do. Medicine, including wine and malt,	39	14	3
Do. Repairs and alterations,	309	17	3
Do. Farm and garden expenses, . . .	52	17	10
Do. Insurance,	22	12	6
Do. Incidental expenses,	75	0	9
Do. Salaries and wages,	985	19	2
Do. Postage,	5	0	6
	<hr/>		
	£5889	16	7
To balance due the public,	1039	18	0
	<hr/>		
	£6929	14	7

23. The pamphlet entitled “The Parish Will Case” by Dr. Pliny Earle, need not be more than noted in this Review, however important to the parties concerned, it not containing anything that would particularly interest our readers on this side of the Atlantic. The author, Dr. P. Earle, the most eminent psychological physician in America, was called upon to give his professional opinion as to the soundness of mind of Mr. Parish, and his capability of disposing of his immense fortune by certain codicils; and the opinion he arrived at was,

and we think most properly, that Mr. Parish was "disqualified from the execution of the codicils in question, or the transaction of any important business." The pamphlet is exceedingly well written, and the points of the case well argued, and does great credit to Dr. Pliny Earle for its clear and logical reasoning.

24. The volume in our list, entitled, "The Causes of Idiocy," is little more than the substance of a Report drawn up by Commissioners appointed under the authority of an Act of the Legislature of Massachusetts, in the year 1846, "to inquire into the condition of the idiots of the Commonwealth, to ascertain their number, and whether anything can be done in their behalf." Dr. Howe was one of three Commissioners thus appointed, and the Report, with its Appendices (of which there are six) and the Introduction, appear to have come from his pen.

In this volume the general reader will find a good deal to interest, and the professional man also some facts whereon to plant his leverage, moral and physical, whereby he may be disposed to endeavour, if not the entire removal of this evil from society (which, however, Dr. Howe thinks perfectly practicable), at least its alleviation.

Speaking of Dr. Howe's theory on the subject, which is thus announced, (p. 3), we are hardly disposed to go the entire length laid down, as regards either the evil or its proposed remedial treatment. The author's words are as follows:—

"It (idiocy) is merely the result of a violation of natural laws, which are simple, clear, and beautiful; which require to be seen and known only in order to be loved; and which, if strictly observed for two or three generations, *would totally remove from any family, however strongly predisposed to insanity or idiocy, all possibility of its recurrence.*"

Much in the same strain the author writes:—

"It may be assumed as certain, that in all cases where children are born deformed, or blind, or deaf, or idiotic, or so imperfectly and feebly organized, that they cannot come to maturity under ordinary circumstances, or have the seeds of early decay, or have original impetuosity of passions that amount to moral insanity, in all such cases the fault lies with the progenitors, &c. &c."

Now we hold such statements to be quite too strong. However judicious and good the prophylactic measures recommended by Dr. Howe may be (and we fully admit their judiciousness), and however large his induction, grounded as it is on the

case and statistics of the State of Massachusetts, we are not Utopian enough to believe that this malady, whether viewed in its physical or moral aspect (and it admits of both), will ever be eradicated from among the ills to which our common humanity is heir, even although Dr. Howe's remedies were universally adopted. Neither can we subscribe to the *dictum* last quoted. Experience is against it, as well as our *a priori* judgment. To say that idiocy is the universal result of viciousness in the parent, and that its appearance among us is unquestionably a proof of sin, would be, in our judgment, to treat the matter exactly as the disciples of the Great Teacher were disposed to treat the ease of the man born blind, as recorded in the Gospel. The reply given to them is familiar to all, and, we think, will fully apply to the case before us also. With these exceptions, we can, however, cordially recommend Dr. Howe's book to professional and general attention and perusal.

25. The Report "On Insanity and Idiocy" in Massachusetts, by the Commission on Lunacy, and drawn up, it appears, by Dr. Edward Jarvis, is a very elaborately prepared State document, one which contains a large amount of matter of considerable local interest, and in no small degree general also. There is the greatest variety of statistical information in well-arranged, and, to all appearances, most carefully prepared tables in this volume, and altogether it is one calculated, we feel quite satisfied, to benefit those for the amelioration of whose pitiful and deplorable condition this means was taken to lay the foundation of plans that would afford permanent accommodation of the most humane and complete kind, in all its details.

26. After our Review had been, as we thought, completed, a copy of Dr. Cantor's Report on the Asylums for European and Native Insane at Calcutta reached us; and, not wishing to hold it over until our next Annual Review on Insanity, it being the first which we have seen in connexion with the state of the insane in our East Indian possessions, we have thought it better on the present occasion to give a notice, however necessarily short and incomplete, of its interesting contents.

The Report embraces a period of two years, namely, 1856 and 1857, for the Asylums at Bhowanipore and Dullunda, respectively.

The former one, for European patients, is situated about a mile from Fort William, close to the General Presidency Hospital, and is stated to be most eligibly circumstanced, both as to salubrity

and seclusion, which are two primary requisites for such an Institution. The ground attached to it, we regret to find, is exceedingly limited, being little more than two acres; it is thoroughly drained, and during the hottest season the temperature is nearly two degrees lower than that of Calcutta, while to the feeling it appears more considerable. In the first instance this Asylum was opened as a private one in the year 1817, but on no definite plan, and has since been added to from time to time. It is intended for both male and female patients, the accommodation altogether being calculated for 62, but in 1856 there was a maximum of 81 pressed into it, which, in a tropical country, and with only two acres of ground,—when properly there should have been from fifteen to twenty at least,—was a very adverse state of things for the health, comfort, and treatment of its inmates. It is no reasonable excuse to say that the Asylum is only intended as a temporary one for European patients, preparatory to sending them home ultimately; it is to all intents and purposes an Hospital for the Insane, and to be constantly used as such, and should accordingly be placed on a more liberal scale of accommodation in all essential respects, and none is of more consequence than an area, not of the smallest possible, but of the largest limits, the crowding such an establishment, and in a country under a burning sun, being, as Dr. Cantor most properly observes, much to be dreaded.

The following account of the wards, &c., will be read with interest even in this country:—

“The wards are well raised, and each room is provided with a window out of reach, and with a door half panelled, half grated. In Bengal such construction is preferable to solid doors with inspection plates, which here would obstruct the free circulation of air. Whenever required, the rooms can be darkened by means of a canvas curtain; but they are not lofty enough to admit of punkahs being slung. Each patient is, therefore, supplied with a palm-leaf fan. The doors are made to open outwards on a common verandah, which being screened by venetians and canvas curtains, offers shelter from the sun and wet. The verandahs during the day also serve as mess and lounging rooms, and are lighted at night. For the wooden bedsteads formerly used in the private Asylum, iron cots of the pattern used in European hospitals, without hinges, have been substituted, as they combine the double advantage of cleanliness and strength to bear attempts at breakage. They may also, whenever required, easily be fixed to the floor. As a general rule, bed utensils are suffered to remain in the rooms in cases of bodily diseases only, as each ward is provided with an easily accessible and airy privy and bathing room, with shower and ordinary baths. The floors are stuccoed, and either

unmatted or covered with loose mats, and so constructed as to admit of baths being administered at a moment's notice. In cases of bodily diseases, and during paroxysms of violence, the patients are treated in their own rooms. The absence of effectual means of seclusion, and of padded rooms, is a serious defect in the original construction of the Asylum. A single violent patient is sure to produce a number of imitators, who keep not only their own wards, but the whole Asylum, in a state of excitement. Want of space and of accommodation also offers material obstacles to the necessary occupation and recreation of the patients. An early application for the services of the Civil Architect to remedy such evils was speedily responded to, and plans have accordingly been prepared. The garden which surrounds the different wards is well laid out, and has, during the years 1856 and 1857, been liberally stocked from the Honourable the East India Company's Botanic Gardens. Indeed, it imparts to the Asylum a pleasing feature of rural quiet. The boundary walls being carefully kept out of view by luxuriant creepers, nothing which can remind of even the ordinary restraint of a hospital has been left. The garden, which is exclusively devoted to the enjoyment of the patients, might be taken to be a gentleman's carefully tended pleasure-ground. It is, however, of too limited extent, considering the paramount importance of extensive pleasure-grounds."

The views expressed in the annexed paragraph are also much to the purpose:—

"In most great asylums in England, the wards are classed in refractory, epileptic, paralytic, and convalescent wards, and one for dirty patients. It has, however, been observed that the disadvantage of a too rigid classification is, that it is apt to create so many intellectual castes, and to make the patients act or assume the part implied by the name of the ward. Chronic insanity is generally benefited by intercourse with sensible people. In the middle of the garden is situated a two-storeyed building, in no wise differing from any other Indian suburban villa. The ground floor contains the following accommodation:—an ante-chamber, where the dishes are served and carved; a dining-hall with punkahs, a side-room used as office and reading or lounging-room; two double and ten single apartments, occupied by gentlemen and lady patients. The apartments are cheerful, and open to the garden. They are furnished and lighted with hanging lamps, and have one corner partitioned off as a bath. The upper story consists of ten rooms, occupied by the apothecary, the matron and her husband, and an overseer. The hall, however, and two of the rooms are reserved, whenever required, for the use of a convalescent lady or gentleman. At first, before all the subordinate officers had joined, the upper storey was divided between the Superintendent and two of the subordinates. Such arrangement, questionable at best, was attended with a most serious objection.

The consequence of the Superintendent's living among, and being at all hours in immediate contact with the patients, led by degrees to the loss of the moral influence, the authority, which it is of the utmost importance that officer should possess over his patients. By comparison with the Asylum for Native Insanes, which is situated at a short distance from Bhowanipore, the difference in the Superintendent's moral power over the patients soon became very marked. It is necessary, or at any rate desirable, that the Superintendent should reside on the premises. But to preserve his moral influence, which is of vital importance in lunatic asylums, the quarters of the Superintendent should be perfectly isolated."

The dietary of the Asylum is as follows:—First-class table: Breakfast—eggs, fish, steaks, chops, cold meat, rice, fruit, preserves, tea, coffee. Dinner—soup, joints, or poultry; side dishes—vegetables, pastry, fruit, preserves; sherry, port, beer, lemonade, iced when desired. Supper—tea, and toast.

Second class, full diet:—Beef or mutton, bread, vegetables, butter, tea, rice, milk, sugar, flour, fruit, &c. &c. The patients are divided into two classes, solely according to their station in life, but with no reference to their means, and the two scales of dietary have been fixed according to the patient's previous social position. Both classes are equally open to poor patients, the first being composed of covenanted or commissioned officers, gentlemen unconnected with the public service, and members of their families. The second class consists of troops of her Majesty's and the Company's service, and of persons of either sex (Europeans or East Indians), unconnected with the public service.

The non-restraint system is practised by Dr. Cantor to the utmost possible extent, mechanical restraint being only had recourse to in cases of unavoidable necessity. On this subject Dr. Cantor expresses himself thus sensibly:—"Restriction in some form or other is *inseparable* from an asylum. Dr. Conolly himself allows certain exceptions in points for which the malady intrinsically disqualifies insanes." Particular instances in which restraint is unavoidable are then cited, where "rigid fingerless gloves, and a strait waistcoat, have been found beneficial." Dr. Cantor further and pointedly observes on this subject:—"How to meet them" (certain specified cases) "without having recourse to some humane contrivance for mechanical restraint, is a problem which, however, those philanthropists who have carried the non-restraint system to its greatest perfection have left subjects of speculation." The state of the Asylum as to admission, &c., during the year 1857, was as follows:—

	M.	F.	T
Remaining under treatment, January 1, 1857,	39	23	62
Admitted since,	29	4	33
	—	—	—
Total under treatment,	98	27	95
Discharged, recovered,	9	0	9
„ improved,	1	3	4
Dispatched to Europe,	25	2	27
Died,	4	0	4
	—	—	—
	39	5	44
Remaining in Asylum, December 31, 1857,	29	22	51
	—	—	—
	68	27	95

The professions and occupations of those admitted during the above period were:—Captains, 2; lieutenants, 3; assistant-surgcon, 1; priest, 1; surveyors, 3; medical subordinates, 5; soldiers, 21; seafaring men, 13; tradesmen, 4; writers, 9; no employment, 6; gentlewomen, 3; soldiers' wives, 7; tradesmen's wives, 27. Total, 95.

The countries to which the patients admitted belonged were:—England, 14 (13 males, 1 female); Scotland, 6 (males); Ireland, 23 (18 males, 5 females); Wales, 1 (male); Spain, 2 (males); Sweden, 1 (male); America, 1 (male); East Indies, 44 (24 males, 20 females); Armenia, 2 (males); Africa, 1 (female). Amongst the supposed causes of insanity the following are the principal:—Intemperance, 22 (18 males, 4 females); religious enthusiasm, 14 (11 males, 3 females); epilepsy, 9 (6 males, 3 females); domestic distress, 7 (2 males, 5 females); congenital, 5 (2 males, 3 females); masturbation, 3 (males).

The causes of death were—exhaustion, dysentery, cholera, old age, each, 2—hemiplegia, abscessus cerebri, apoplexy, diarrhœa, and caries, each one. The Report contains the particulars of the post-mortem examinations which were made in the above, which are full and suggestive. The rules and regulations for the management of the Asylum, the Physician-Superintendent being properly vested with the fullest authority, are embodied in the Report, and appear well adapted for their purpose.

The Asylum at Dullunda is for pauper natives alone, and is a mile to the southward of Fortwilliam; it covers a little more than nine acres, and is occupied by Hindoos and Mussulmans. The following was its state for 1857:—

	M,	F.	T.
Remained under treatment, 1st January, 1857,	206	55	261
Admitted since,	154	52	206
	<hr/>	<hr/>	<hr/>
Total admitted and readmitted, .	392	122	514
	<hr/>	<hr/>	<hr/>
Discharged, cured,	64	18	82
„ improved,	66	13	79
Died,	62	30	92
	<hr/>	<hr/>	<hr/>
	192	61	253
Remained, 31st December, 1857, .	200	61	261
	<hr/>	<hr/>	<hr/>
	392	122	514

The causes of the deaths in the above table were as follow:—Dysentery, 32 (23 males, 9 females); diarrhoea, 15, (7 males, 8 females); exhaustion, 13 (8 males, 5 females); disease of lungs, 8 (males); epilepsy, 6 (4 males, 2 females); old age, 6 (3 males, 3 females); cholera, 4 (3 males, 1 female); anasarca, 3 (2 males, 1 female); apoplexy, convulsions, enteritis, epilepsy, erysipelas, and hepatitis, each, 1 (5 males, 1 female). Total, 92.

The native insane patients are stated by Dr. Cantor to be generally much more manageable than Europeans. The non-restraint principle is the rule in force at Dullunda, in the same manner as at Bhowanipore. In regard to their occupation, Dr. Cantor observes:—

“In 1856, in the Asylum of Dullunda, a plot of ground was under cultivation with sugar-cane; some of the patients assisted the gardeners, and a few, the cooks. The occupation, however, left something to wish as far as regarded adequacy and regularity. Employment of insanes, having for its permanent aim the well-being and possible cure of the patients, is a means to those ends only. What will pay or prove remunerative, need not be lost sight of,—but as a secondary consideration. If the labour be not perfectly voluntary, but be suffered to become compulsory, not only will the object in view be lost, but what was wholesome becomes the very reverse. This is precisely the point of difference between the labour of insanes and of prisoners. Much more work might be done than the number of hands do at Dullunda, but then it could only be effected by compulsion.”

The dietary and clothing of the Dullunda patients are given in the annexed extract:—

"The patients are dieted and clothed by private contract at a fixed monthly rate of Rupees 3 for each patient. The provisions are submitted to daily examination, to insure their quality and quantity being unexceptionable. They are far superior to those which the patients, who almost all belong to the poorest class of natives, are accustomed to in health. To the majority, who on admission present a sad spectacle, the Asylum must appear like a grand mansion, and the effects of comfort and regularity soon become apparent in an improved physical condition. The following scale of diet has, during a number of years, obtained in the Asylum, first at Russapuglah, and later at Dullunda.

"At 6 or 7 A. M.—Wheat porridge, 2 oz.

"At 10 or 11 A. M.—Rice, 10 oz.; pease, 4 oz.; vegetables, 4 oz.; salt, $\frac{1}{2}$ oz.; spices, 2 drachms; butter, 2 drachms; sugar, 2 drachms; betel-nut, $\frac{1}{4}$; paun-leaf, 1; hookah tobacco, 2 oz.

"At 5 or 6 P. M.—Rice, 8 oz.; beef or mutton, 4 oz.; fish, 4 oz.; vegetables, 4 oz.; oil, 2 drachms; salt, $\frac{1}{2}$ oz.; spices, 2 drachms; betel-nut, $\frac{1}{4}$; paun-leaf, 1; hookah tobacco, 2 drachms. Buttermilk, 12 oz., and potatoes, 8 oz., are allowed once a week. This is a bare standard scale of full diet, to which are added daily indulgencies, such as sweetmeats, cigars, fruit, &c., as rewards for good conduct. The hospital diet is modified according to each individual case. Extra articles, such as poultry, milk, tea, bread, &c., are separately accounted for; wine and spirits are obtained through the Commissariat Department. The clothing consists of the few articles of dress worn by the poorer classes of natives of Bengal. Each patient is supplied with a woollen blanket, three or four yards of cotton cloth, a sleeping mat and bedding of gunny. Shoes are articles of luxury, and given as such, when asked for. The great majority of patients are admitted in a state bordering upon nudity, and are, therefore, on discharge permitted, not only to retain the Asylum clothing, but the magistrate of the 24-Pergunnahs bestows charities to speed the peniless to their distant homes."

We are unable, from press of time, to devote more attention or space to this excellent Report of Dr. Cantor, and cannot conclude our review of it without expressing our great satisfaction at finding that the insane patients in the Bengal Presidency are under the care of a member of our profession of such enlightened and eminently humane views as Dr. Cantor, whose Report in all its details does him the highest credit. The Government also deserve much praise for the liberal spirit in which they seem disposed to provide for the due treatment and maintenance of both the European and native insane of Bengal.